

Date and time of visit: _____

Instructor: _____

Class number & name: _____

Spaces used:

- Pav. III Education Gallery Object Storage Painting Storage
- WOP Storage Special Exhibition(s): _____
- University Classroom Community Classroom Other: _____

Tour leader(s): _____

Total number of students/faculty: _____

Faculty member present? Yes No

Preliminary visit by faculty member? Yes No

Number of objects used: _____

Assignment? Yes No Details: _____

Activity? Yes No Details: _____

Pre-visit Checklist:

- Date set with instructor
- Got syllabus
- Established goals for visit with instructor
- Sent list to instructor
- Revised list and sent back to instructor
- A/V needs established
 - DVD/VHS/CD
 - Projector
 - Laptop hook-up
 - Internet access
- Visit confirmed
- Museum rules and visit guidelines sent to instructor
- Print-outs/extra materials made

Post-visit Checklist:

- Follow-up email/survey to instructor
- Numbers entered into statistics
- Class entered into TMS
- Photos uploaded to class folder

What is the goal for the visit?

What questions should the students consider?

Additional

Notes: _____
