

LODGING REPORT – DUE ONE WEEK AFTER TRIP

Submit to the International/Intercultural Office, A003

Today's Date: _____

Trip Destination: _____

Trip Dates: _____

Trip Leader 1: _____ Email: _____

Trip Leader 2: _____ Email: _____

| | Lodging #1 | Lodging #2 | Lodging #3* |
|---|-------------|-------------|-------------|
| Name of Lodging: (e.g., hotel, motel, hostel) | | | |
| Address: | | | |
| Phone #: | | | |
| Dates of Stay: (i.e., July 11 – 14 or March 11-13 and 18-19) | | | |
| Room Numbers (student rooms only): | | | |
| Stayed previous years? | Yes No | Yes No | Yes No |
| Local Law Enforcement Agency (LLEA) (the place of lodging should be able to provide this information) | | | |
| LLEA Address (the place of lodging should be able to provide contact information) | | | |

** List additional facilities on a separate sheet of paper*

Signature of Submitter

Date