Thank you for your interest in visiting IEN at Georgia Institute of Technology or for scheduling a visit to your school. To schedule a visit, please fill out the form below as completely as possible. We will contact you regarding your request in approximately one week. Please limit your group to 40 attendees.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Contact Information** | | | | | |
| First Name |  | | Last Name | |  |
| Job Title |  | | | | |
| School |  | | | | |
| Address 1 |  | | | | |
| Address 2 |  | | | | |
| City |  | | | | |
| State |  | Zip | |  | |
| Email Address |  | | | | |
| Work Phone |  | Work Fax | | | |
| Cell Phone |  | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Tour Group Information** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Preferred Date(s) for workshop | | | | | | | 1st | | | | | | 2nd | | | | | 3rd | | | | | | | |
| *If all dates listed above are unavailable, we will contact you for additional choices of dates.* | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of Visitors **(40 max)** | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **(2 hour increments)** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Desired Arrival Time | | | | 9am | | | | 10am | | | 11am | | | | 12pm | | | | | 1pm | | | | 2pm | | |
| Desired Departure Time | | | | 11am | | | | 12pm | | | 1pm | | | | 2pm | | | | | 3pm | | | | 4pm | | |
| Grade Level of Audience **(check all that apply)**  11am  12pm  1pm | | | | | | | | | | | | | | 6-8 | | 9-12 | | | | | | college | | | | |
| Purpose of Visit | |  | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Activity Requested **(check all that apply)** | | | | | | hands on activities | | | | | | | | | | | | Lecture | | | | | lab tour | | | |
| cleanroom tour \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | SEM/microscopes | | | | | | | other **(please specify)** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Visit Location: | Georgia Tech | | | | | | School | | other **(please specify)** | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Level of audience familiarity with nanotechnology | | | | | | | | | | | | not familiar | | | | | some | | | | very familiar | | | | |
| Is Bus parking needed on the day of your visit? | | | | | | | | | | | |  | | | | | yes | | | | | | | | no |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Email or fax form to either: | | | | | | Email [qspadola3@gatech.edu](mailto:qspadola3@gatech.edu) leslie.oneill@ien.gatech.edu | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Fax 404-894-5142 | | | | | | | | | | | | | | | | | | | |