

HONOLULU COMMUNITY COLLEGE

Outreach Office - Campus Tour Request Form

Today's Date: _____

Name of Group: _____

Name of Contact Person: _____ Phone: _____

E-mail: _____ # of participants: Students _____ Chaperones _____

Date of Tour Requested: _____ From _____ a.m./p.m. to _____ a.m./p.m.

Purpose of Visit: _____

Special accommodations, if needed: _____

Please select the programs you are interesting in visiting. Keep the following in mind when selecting programs:

- Please rank the programs you wish to visit. 1 is your first choice, second, etc. Anticipate about 20 minutes per program.
- We will do our best to schedule with each requested program; however, some programs may not be available the day of your visit.
- We request that one (1) advisor/chaperone be available per fifteen (15) students in attendance.
- Not all programs are located on campus. If you would like to visit an off-campus site, we can work with you to make arrangements or you can inquire about having a representative from an off-campus program meet with your group on campus. Please anticipate at least 25 minutes for DISL and AMT. Off-campus programs are listed in *bold italics*.

___ Administration of Justice
___ *Aeronautics Maintenance Technology*
___ Architectural, Engineering & CAD Technologies
___ Autobody Repair and Painting
___ *Automotive Technology*
___ Carpentry Technology
___ Communication Arts
___ Computing, Electronics, & Networking Technologies
___ Cosmetology
___ Construction Management
___ *Diesel Mechanics Technology*
___ Early Childhood Education

___ Electrical Installation & Maintenance
___ Fashion Technology
___ Fire & Environmental Emergency Response
___ Hawaiian Studies
___ Human Services
___ Liberal Arts - Classes
___ Music & Entertainment Learning Experience
___ Occupational & Environmental Safety Mgmt.
___ Refrigeration & Air Conditioning Technology
___ Sheet Metal & Plastics Technology
___ *Small Vessel Fabrication and Repair*
___ Welding Technology

Please give at least 3 weeks advance notice for tour requests. Return your completed form by email with the title "Campus Tour Request for (Insert School/Organization)" or scan and e-mail to hccreach@hawaii.edu. Once this form is received, we will do our best to accommodate your requests. You should hear back from us within 3 business days. Please keep in mind that once a schedule has been created, it is difficult to make additions/substitutions. Select carefully and confer with others in your group to determine programs of interest prior to submitting this form. Thank you for your cooperation and understanding!

If you have any questions or need additional information, you can call (808) 844-2309 or e-mail: hccreach@hawaii.edu. We look forward to meeting with your group soon!

For office use only:

Emailed Confirmation of Tour: _____

Room request submitted: _____

Tour Guides: _____

Drop off Location/Parking: _____

Reminders to be given on: _____

NOTES