

Center for International Programs Student/Parent Conversation Log

STUDENT LAST NAME		STUDENT FIRST NAME	
STUDENT ID	PHONE	E-MAIL	
PROGRAM		PARTICIPATION YEAR	GRAD YEAR
NAME OF CALLER		RELATIONSHIP TO STUDENT	
PHONE NUMBER OF CALLER		E-MAIL OF CALLER	
REASON FOR VISIT/CALL			
CIP STAFF MEMBER		DATE	

Information:

Establish follow up communication (when will they hear from you?):

Verify contact information:

Explain next steps:

CIP staff follow up:

Other info needed: (insurance, health history, local phone numbers)

Communication to Provost, Dean of Students?

.