

# GEORGIA O'KEEFFE ELEMENTARY SCHOOL

## VISITOR INFORMATION FORM

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In order to help us meet your expectations for this visit, please complete the following information and return to Georgia O'Keeffe (GOK) by e-mail, mail or fax. We look forward to your visit!

- Who will be visiting GOK? How many of each group will attend?  
\_\_\_\_\_ Principals                      \_\_\_\_\_ Teachers (Grades K-2)  
\_\_\_\_\_ Administration                \_\_\_\_\_ Teachers (Grades 3-5)  
\_\_\_\_\_ Others ( \_\_\_\_\_ )
- What are your expected outcomes from this visit? \_\_\_\_\_  
\_\_\_\_\_
- Tuesdays and Thursdays are the best days for GOK to have visitors. When would you like to visit GOK? Please list the date and one alternative date.  
First Choice \_\_\_\_\_  
Second Choice \_\_\_\_\_
- Who would you like to spend time with?  
\_\_\_\_\_ Teachers                      \_\_\_\_\_ Students  
\_\_\_\_\_ Support Staff                \_\_\_\_\_ Administration                \_\_\_\_\_ Other
- Name, telephone number and e-mail address of contact person to set up this visit.  
\_\_\_\_\_
- Level of Baldrige knowledge of your group. (Circle one).  

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
<b>Beginner</b>				<b>Intermediate</b>					<b>Advanced</b>

Thank you for providing this information to us. We will check our master schedule for the availability of the date you have requested and will contact you to confirm your visit. After we confirm your visit, please send us the name and title of each visitor. If you have any further questions, please contact us at (505) 293-4259.

FAX (505) 293-4586  
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