

College Campus Visit Reflection

An Authentic Assessment

College/University visited: _____

Date of visit: _____

Who went with me: _____

Location of campus: _____

_____ miles from home

Annual cost: _____

Number of students attending this college/university: _____

Program(s) I am interested in: _____

Requirements for enrollment: _____

ACT/SAT Scores: _____

GPA: _____

Other: _____

Housing on campus? ☐ Yes ☐ No

I liked: _____

I didn't like: _____

What I learned about disability services: _____

I need to find out more about: _____

After this visit, I am still interested in attending this college/university: ☐ Yes ☐ No



INDIANA INSTITUTE ON DISABILITY AND COMMUNITY

CENTER ON COMMUNITY LIVING AND CAREERS

Indiana Secondary Transition Resource Center

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