

In-Country Itinerary for Education Abroad Programs

Ground Transportation

Public Bus Hired Driver/Private Shuttle Taxi Van

Name of Driver/Shuttle Company: _____

Phone Number: _____ E-mail: _____

Lodging

Lodging Name: _____

Lodging Address: _____

Phone Number: _____ E-mail: _____

Dates of Lodging: _____

(Attach additional pages listing all lodging if needed.)

Itinerary

Day-to-day Detailed Itinerary: (Please attach additional pages as needed. For programs that are more than 30 days, please provide weekly itinerary.)