

New Study Abroad or Exchange Program Cover Sheet

I: FACULTY INFORMATION AND SIGNATURES

Study-Abroad or Exchange Program Title:	
Country (if different):	
Proposed by:	(printed name[s])
	(signature[s])

Date: _____

Signatures	Check Recommendation Yes No		Date
Chair(s):			
Dean(s):			
Director of Study Abroad and International Exchange:			
Study Abroad Committee:			
Executive Director of the Center for Extended and International Education:			
Provost:			

Original completed packet (with Signatures) should be returned to the Office of Study Abroad and International Exchange (325 Drane Street, International White House 2nd Floor).

Note: All proposals must include a narrative, a tentative budget, itinerary, and letters of support from the sponsoring department's chair and dean of the sponsoring college.

II: PROGRAM INFORMATION PAGE

1. Program Title:					
2. Program Location:					
3. Lead APSU Faculty	Member(s):				
Phone:			Email:		
5. Program Term:			Fall Semester	Spring Semester	
	Academic Year		Winter Break	Spring Break	
	Other, please specify:_				
6. Program Length (v	veeks):	_Dates:	From	То	
7. Anticipated Freque	ency of Program Offering:				
One-time of	fering Biannu	al	Annual	Twice or more annually	
9. Contact Person in	host country:				
Telephone #:			Fax #:		
Email:					
10. Total number of	APSU credits to be awarde	d:	Min	Max	
11. Type of program	housing to be used or opti	ions avail	able (check all that app	y):	
Host Un	iversity Dormitories		Home stays	Commercial hotels/apartments	
Other,	please specify:				
12. Anticipated stud	ent enrollment:	Min _		Max	
13. Majors from wh	ich students are likely to be	e drawn:			

14. Please attach a narrative/budget/general itinerary/ college approvals: All proposals must include a narrative, a tentative budget, itinerary, and letters of support from the sponsoring department's chair and dean of the sponsoring college, as described on the cover sheet.

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