**2018 – 2019 Faculty-led Study Abroad Proposal**

International Programs and Partnerships is committed to providing a wide range of programs which align with the academic mission of the University and increase access to study abroad opportunities for our diverse student population. Faculty-led study abroad programs provide a unique opportunity to enhance UTRGV curricula through infusion of an international learning environment into specific courses. In addition, faculty advocacy and leadership has been shown to attract students who are unlikely to study abroad through other means.

We invite faculty, with the support of their school/department and college, to submit proposals for a minimester or summer study abroad program to be offered in 2018 and 2019. All proposals will be considered. However, to build on the strengths inherent to faculty-led study abroad programs, preference will be given to proposals which address one or more elements of the competitive priorities listed below.

**2018-2019 Competitive Priorities:**

* The proposed course(s) fulfill(s) a major degree requirement or university core course
* The program can attain the target student enrollment of 15-20 students or more
* The program includes a research component resulting in “creation of knowledge” with the development of students’ skills, knowledge, and career preparedness.

**DEADLINE FOR SUBMISSION: Wednesday, April 28, 2017, 5:00pm CST**

**INSTRUCTIONS:**

1. Submit a paper copy of the complete proposal packet with original signatures to International Programs and Partnerships (IPP) at ESTAC 3.128 or BMAIN 1.308.
2. The complete proposal packet must be received by the deadline.

**A complete proposal packet includes:**

* Completed proposal form signed by your school director or department chair. Programs with two faculty proposing from different schools/departments require the signatures of both school directors and/or department chairs. If the unit does not have a director/chair, the dean’s signature is required.
* Course descriptions and syllabi for all program courses.
* Tentative program calendar/itinerary. The calendar/itinerary should include dates or number of days in all locations, including proposed excursions. The itinerary may be incorporated into the structure of the syllabus if preferred.
* Feedback from the Center for Teaching Excellence on the proposed syllabus. Request information from cte@utrgv.edu.

**IMPORTANT NOTES:**

1. **Please read FACULTY LED STUDY ABROAD PROGRAM APPROVAL PROCESS 2018** and [contact](mailto:ipp@utrgv.edu?subject=Faculty-led%20Study%20Abroad%20Proposal%202018-2019) an International Programs Specialist at IPP prior to submission.
2. Please note if your program has a [US Department of State travel warning](https://travel.state.gov/content/passports/en/alertswarnings.html).
3. **Incomplete proposals will not be considered.** Paper copies may be dropped off at ESTAC 3.128 or BMAIN 1.308. After receipt, completed proposals will be forwarded on your behalf to the appropriate dean for review and ranking.
4. **Minimum enrollment requirements.** To maximize university resources and provide affordable programs for UTRGV students, our target enrollment for undergraduate programs is 15-20 students, and 10-15 for graduate programs. In the selection process, priority will be given to programs that can attain the target enrollment numbers.
5. **Minimum GPA requirements.** The minimum is good academic standing (2.0 undergraduate and 3.0 graduate students). Faculty leaders are encouraged to set their GPA eligibility requirement at the lowest appropriate level in order to provide the greatest access to study abroad among our students.
6. **Minimester programs** must grant a total of three credits and meet the contact hours requirements. Minimesters are two to three weeks in length. They begin after graduation and end before Summer Session I ends on campus. They occur as part of spring registration.
7. **Summer programs** may grant up to six credits with two three-credit courses. Summer programs are 5 weeks in length. If you plan to offer a course outside of your department and/or taught by another institution, please include proposed UTRGV course equivalency(ies) and identify which degree requirement the course fulfills.
8. **Course information** must be accurate. Course details for selected programs will be forwarded to the Office of the Registrar and departmental course schedulers in late June (10 months in advance of departure) for inclusion in the course catalog.
9. **Notification** of proposal decisions will occur by May 15.

**General Information**

**Faculty Leader**

Study Abroad guidelines recommend one faculty leader per 15-22 students, depending on the level of on-site logistical support. If your program is intended to serve more than 22 students, you may consider including a second faculty leader, T.A., or graduate assistant.

|  |  |  |
| --- | --- | --- |
| Name: | Title: | Dept.: |
| EID: | E-mail: | Campus Mail Code: |
| Will this program require a second faculty leader?  yes  no | | |
| Name: | Title: | Dept: |
| EID: | E-mail: | Campus Mail Code: |

**Support Staff**

Will this program require a T.A. or graduate assistant?  yes  no How many?

What is the role/function of the T.A. or graduate assistant (i.e. grading, program logistics, etc.)?

Will he/she be hired from UTRGV or contracted locally overseas?  UTRGV  local

Support staff incurs additional costs for the department and the students. I have confirmed that my department will incur the cost of the T.A./graduate assistant salary.  yes  no

**Basic Program Information**

Title of Program

Proposed Program Location(s)

|  |  |  |  |
| --- | --- | --- | --- |
| Proposal type: |  | |  |
|  | Minimester Abroad (2-3 weeks) | | Summer 1 (5 weeks) |
|  |  | | Summer 2 (5 weeks) |
|  |  | | Summer Whole (      weeks) |
|  | | | |
| Minimum number of participants: | | Maximum number of participants: | |
| For repeat programs only: In which years has this program been offered?  Program type:  classroom experience  field school  other (explain) | | | |

**Course Information**

Please list the title, number and instructor of all proposed courses to be offered as part of this program.   
  
This section of the application can be completed with the assistance of an academic advisor in your department.

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| --- |
| Title and Number:  Instructor: |
| Requirements met:  major required course  major elective  university core:        other: |
| Course pre-requisites (must match on-campus requirements): |
| (Optional) Please list suggested cross-listing courses below.  Number: Pre-requisites: Requirements met: |
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| Requirements met:  major required course  major elective  university core:        other: |
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| Requirements met:  major required course  major elective  university core:        other: |
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| (Optional) Please list suggested cross-listing courses below.  Number: Pre-requisites: Requirements met: |
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Comments (if applicable):

**Program Details**

In order to ensure that the International Programs Advisory Committee gives your proposal consideration, please type in your answers below.

**Rationale for Conducting Course Abroad**

1. Please explain your rationale for choosing the course(s) and the proposed location(s). How do you expect the location(s) to influence your teaching and student learning? What are your academic and program goals?

1. If applicable, please describe all of the proposed excursions (day or overnight trips outside the program location) and their connection to the academic focus of your course(s).

1. How does the proposed program fit school/department/college/unit goals for providing international experiences for students?

**Safety and Security**

For specific questions, please feel free to contact International Programs and Partnerships, [mailto:ipp@utrgv.edu?subject=Crisis Preparation and Protocols](mailto:ipp@utrgv.edu?subject=Crisis%20Preparation%20and%20Protocols).

1. Please describe any health, safety, or security considerations related to the location you are proposing and how they may impact the program. You may wish to review the following resources: [U.S. Department of State, Centers for Disease Control and Prevention, and the International SOS country risk ratings](http://world.utexas.edu/risk/travelresources).

* 1. Describe the policies and measures the program will take for mitigating any specific health, safety, and security risks identified above. Include any relevant information about local support staff and any related training or experience for managing health, safety, or security issues.

1. Please describe the means of transportation to the proposed excursion(s) and address any potential safety concerns related to the travel, activities or destination of the excursion(s).
2. Is the program location currently under a [US Department of State Travel Warning](https://travel.state.gov/content/passports/en/alertswarnings.html)? (Yes or No)

**Recruitment and Pre-program Preparations**

1. Which student population(s) are you targeting and why will this program (course and location) appeal to them academically and personally? Approximately how many students comprise your target population on the UTRGV campus?

1. What avenues are open to you through your school/department and college for reaching your target group(s)? (i.e. listserves, newsletters, informational sessions, classroom presentations, events, lectures, etc.) Who are key contacts in your department who will assist with recruitment?

1. Do you have any commitments that will take you off campus for more than three weeks during the academic year prior to the program? If yes, please explain.

**Related Previous Experience**

1. Please briefly outline your experience teaching the proposed course(s) or similar courses at UTRGV, any experience teaching U.S. students in a foreign setting, or other analogous teaching experience.

1. What is your experience in the proposed location(s)? When was the last time you visited this location, and for how long?

1. For repeat programs only: please describe any changes you intend to make to the structure or academic content of the program compared to prior years, if applicable.

**Faculty Leader Agreement**

If selected to teach this program, I agree to the responsibilities listed here:

* Teach the course in the proposed location for two consecutive years (dependent upon sufficient enrollments and evaluations.)
* Submit an addendum to this proposal should any significant portion of the program change (i.e. addition of a T.A.; changes to course content, excursions or program activities); before the stipulated deadline and prior to departure.
* Be on campus during the fall semester prior to the program and actively recruit students to participate in the program;
* Be on campus during the spring semester prior to the program to provide pre-departure orientation(s) for admitted students;
* Attend two mandatory workshops for faculty leaders during the year prior to the program’s departure, offered in September and April;
* Strongly encourage students to complete a Study Abroad on-line program evaluation. I understand that these evaluations will be circulated to Study Abroad staff and my department chair;
* Submit grades for each student at the end of the program, by the stipulated deadline;
* Submit an evaluative report of the program within 45 days of program completion; and
* Submit all receipts and any remaining funds to International Programs and Partnerships within two weeks of program completion.

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| **Printed name:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

**Endorsements**

|  |  |
| --- | --- |
| Program proposed by: | Dept.: |
| Program name/location: | |

Proposal type:  Minimester Abroad  Summer 1  Summer 2  Summer Whole

**Your signature below indicates that the department and college/school endorse this program proposal and agree to support the program through promotional activities, academic advising, course scheduling, and verification of participant registration in program courses.**

Student participants will be assessed a program fee that includes the following costs for the faculty program leader(s), and T.A. if applicable: travel (both international and program-related local), international medical insurance, accommodations, stipend for meals and incidental expenses, use of a cell phone and program activities.

**School/Departmental Support:**

Submit the complete proposal packet to International Programs and Partnerships (ESTAC 3.128, BMAIN 1.308) by **April 28, 2017,** including this section. Complete proposals will be returned to the Dean after review by International Programs and Partnerships.

|  |  |
| --- | --- |
|  | |
| School/Dept Contact name: | Campus Address /Mail Code: |
| E-mail: | Phone: |

**Endorsement of School Director or Department Chair**

**Director/ Chair (please print)**  \_\_ \_\_\_\_\_

**Signature of Director/ Chair** Date \_\_\_\_\_

***International Programs and Partnerships will obtain the following signatures.***

**College Support**

**Endorsement of Dean:**

Return this signature page by **Friday, May 5, 2017** to IPP (ESTAC 3.128, BMAIN 1.308, [ipp@utrgv.edu](file:///C:\Users\wgh575\Downloads\ipp@utrgv.edu)). Only programs endorsed by the college/school will be reviewed by the International Programs Advisory Committee.

Please rank this proposal in order of priority to the college/school compared to the other proposed study abroad programs from the college/school.

❑ Endorsed **Assigned rank:**

❑ Not endorsed

**Dean (please print)**

**Signature of Dean or designee** Date

**International Programs Advisory Committee**

**Review of Committee:**

Return this signature page by **May 12, 2017** to IPP (ESTAC 3.128, BMAIN 1.308) [ipp@utrgv.edu](file:///C:\Users\wgh575\Downloads\ipp@utrgv.edu).

❑ Recommended for endorsement

❑ Not recommended for endorsement

Program years:

List stipulations, if any:

Comments:

**Representative (please print)**

**Signature of Representative** Date

**Assoc. Provost Support**

**Endorsement of Assoc. Provost:**

❑ Endorsed

❑ Not endorsed

**Signature of Assoc. Provost or designee**  Date