**Information Sheet**

**Agreements with International Universities**

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| Name/Title: | Click here to enter text. |
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| Department: | Click here to enter text. | College: | Click here to enter text. |
|  |  |
| Email: | Click here to enter text. | Phone: | Click here to enter text. |

**AGREEMENT INFORMATION:**

*Please answer the questions below and submit with the proposed Agreement.*

1. **Names/positions of UTRGV parties involved.**
2. **Brief overview of partner university/institute/organization.**
	1. **Name:**
	2. **Location:**
	3. **First Year of Operation:**
	4. **Ranking (Visit** [**www.4icu.org**](http://www.4icu.org) **and search the institution’s ranking among all institutions in the specific country.):**
	5. **Student Enrollment:**
	6. **Highest Degree Offered:**
	7. **Public/Private:**
	8. **Partner institution contact person/email:**
3. **How will signing this Agreement contribute to the strategic mission of UTRGV?**
4. **Describe the purpose and intent of this Agreement.**
5. **Describe proposed collaboration with UTRGV partner and how the goals of the collaboration will be assessed.**
6. **Describe any past or ongoing collaboration with UTRGV partner.**

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| Department Chair Name: | Click here to enter text. |

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| Reviewed and Approved by Chair: | Yes | No |

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| Dean’s Name: | Click here to enter text. |

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| Reviewed and Approved by Dean: | Yes | No |