

Center for International Education Southwest Minnesota State University

Education Abroad Faculty Led Program Proposal

This Education Abroad Faculty Led Program Proposal and all supplemental materials must be submitted to the **Center for International Education (CIE)** via email at cie@smsu.edu and a signed copy should be sent to CIE in the Student Center, Room 237 by the appropriate deadline. Please submit both an email copy and a signed copy.

Program Title:

Person Submitting Proposal:

Submission Date:

Proposal Checklist

Faculty Leader

- Proposal
- Syllabus for each course*
- Program Provider Information (proposal, itinerary, and budget) (if applicable)
- Detailed Itinerary (including dates and time frames within each day and all planned activities)
- Detailed Budget Worksheet
- Promotional Brochure/Marketing Information

Important Note*: A short-term education abroad program should include at least 12.5 student contact hours per credit. A schedule and/or syllabus should identify how the hours are met. A standard of 12.5 student contact hours per credit is the university norm and applies to short-term education abroad as well. Contact hours include class time or activities in which the faculty is directly involved with an educational activity with the students.

Department & Dean's Approval

All proposals must be approved in advance by Department Chairs, the Global Studies Committee (as appropriate), and your Dean. Faculty members should seek such approval and signatures prior to submission of this proposal to the Center for International Education (CIE).

Proposal Deadline: The deadlines for the proposals will be October 1st and November 1st (Fall) and February 1st and March 1st (Spring) with a notification of one month after the submission deadline. Proposals should be submitted and approved at least one year in advance of the proposed program date.

Program Leader

Primary Leader Name:

Title:

Telephone:

Email:

Sponsoring Department/College:

Department Chair:

School Dean:

Will your partner/spouse, minor children, other family members, or other non-registered program participants be accompanying you on this program? No Yes

If YES, by signing this form, you acknowledge that your priority and focus throughout the duration of this university sanctioned program is towards this program and to the program participants. Any travelers who are non-participants of the program, will have to arrange and pay for their travels and expenses separately. Any accompanying minors, must not be under your care and responsibilities during this program. You must arrange for care and responsibility for any accompanying minors by others who are not co-leaders or registered program participants. Please be aware that co-leaders must travel with the program participants on public or chartered transportation (you cannot drive yourself and others while on this program). You must also lodge at the same location as all the participants (you may not leave the participants and stay at a different lodging with your travel companions; co-leaders must stay with the group at all times). Additionally, all accompanying travelers who are non-participants must sign the university's liability waivers to remove SMSU from any liability. Please list all your accompanying travelers below.

Name (First Name, Family Name):

Relationship:

Please check here if this person is a minor under 18 years of age at any time during this program.

Name (First Name, Family Name):

Relationship:

Please check here if this person is a minor under 18 years of age at any time during this program.

Name (First Name, Family Name):

Relationship:

Please check here if this person is a minor under 18 years of age at any time during this program.

Additional Leaders

2nd Co-leader -- Name:

Title:

Dept:

Telephone:

Email:

Sponsoring Department/College:

Department Chair:

School Dean:

Will your partner/spouse, minor children, other family members, or non-registered program participants be accompanying you on this program? YES NO

If YES, by signing this form, you acknowledge that your priority and focus throughout the duration of this university sanctioned program is towards this program and to the program participants. Any travelers, who are non-participants of the program, will have to arrange and pay for their travels and expenses separately. Any accompanying minors, must not be under your care and responsibilities during this program. You must arrange for care and responsibility for any accompanying minors by others who are not co-leaders or registered program participants. Please be aware that co-leaders must travel with the program participants on public or chartered transportation (you cannot drive yourself and others while on this program). You must also lodge at the same location as all the participants (you may not leave the participants and stay at a different lodging with your travel companions; co-leaders must stay with the group at all times). Additionally, all accompanying travelers who are non-participants must sign the university's liability waivers to remove SMSU from any liability. Please list all your accompanying travelers below.

Name (First Name, Family Name):

Relationship:

Name (First Name, Family Name):

Relationship:

Name (First Name, Family Name):

Relationship:

Name (First Name, Family Name):

Relationship:

3rd Co-leader -- Name:

Title:

Dept:

Telephone:

Email:

Sponsoring Department/College:

Department Chair:

School Dean:

Will your partner/spouse, minor children, other family members, or other non-registered program participants be accompanying you on this program? No Yes

If YES, by signing this form, you acknowledge that your priority and focus throughout the duration of this university sanctioned program is towards this program and to the program participants. Any travelers who are non-participants of the program, will have to arrange and pay for their travels and expenses separately. Any accompanying minors, must not be under your care and responsibilities during this program. You must arrange for care and responsibility for any accompanying minors by others who are not co-leaders or registered program participants. Please be aware that co-leaders must travel with the program participants on public or chartered transportation (you cannot drive yourself and others while on this program). You must also lodge at the same location as all the participants (you may not leave the participants and stay at a different lodging with your travel companions; co-leaders must stay with the group at all times). Additionally, all accompanying travelers who are non-participants must sign the university's liability waivers to remove SMSU from any liability. Please list all your accompanying travelers below.

Name (First Name, Family Name):

Relationship:

Name (First Name, Family Name):

Relationship:

Name (First Name, Family Name):

Relationship:

Name (First Name, Family Name):

Relationship:

Purpose for International Travel

Course Conference/Workshop Volunteer/Service learning Internship Other (Explain)

Brief Program Description

Please provide a brief description of the program.

Program Learning Objectives

Please provide student-learning objectives.

Program Logistics

Program Site(s) - Please provide all Cities & Countries:

Course Dates (from mm/dd/yyyy to mm/dd/yyyy):

On-site Dates (Departure Date mm/dd/yyyy and Return Date mm/dd/yyyy):

Total On-site Duration in number of days:

Is Language(s) Proficiency Required Aside from English? YES NO

If YES, what Language(s) Are Required? If NO, how will students cope with any language barriers?

Please list any experiential components of the program, including service-learning, fieldwork, or research opportunities.

Proposed Itinerary

Please note: All programs must begin within the relevant spring, fall, or summer session for financial aid purposes.

Proposed Departure Date: mm/dd/yyyy

Proposed Return Date: mm/dd/yyyy

Itinerary		
<i>(Provide travel itinerary and detailed day-to-day activities)</i>		
Date	Time	Location & Activity

Student Enrollment

(Degree-seeking students)

At least 60% of program participants must be SMSU degree-seeking students or alumni within the last four years or current degree-seeking students from another college/university.

We recommend a ratio of leaders to participants of approximately 1:10 for safety and risk management reasons.

What is the target group size? **Minimum:** **Maximum:**

Which departments do you expect there to be student interest? What majors/areas of studies will you be targeting recruitment?

At least 60% of program participants must be SMSU degree-seeking students or alumni within the last four years or degree-seeking students from another college/university. Is your program open to students from other institutions who wish to participate? YES NO

Participant Eligibility Requirements (i.e. major, academic standing, minimum GPA, prerequisites, etc.)

Required Participant Preparation

Number of contact hours for pre-departure preparation/orientation

Lists topics to be covered during the preparation/orientation, amount of time devoted to each topic, and names of individuals involved in teaching each topic:

Risks

Please identify any health and safety risks you are aware of in the destination country(s) which may include, but not be limited to, the following activities: water activities or travel on water, strenuous physical activity, exposure to dangerous plants and animals, extreme environmental conditions (e.g., high altitude), farm visits/working with animals, and home stays.

Please also review the following websites and identify the risks they indicate: <http://travel.state.gov/> (see consular information sheets, travel warnings and public announcements) <http://www.who.int/en/>, <http://www.cdc.gov>

Please comment on how you will address these risks:

Additional Considerations

Please identify any organizations (outside of SMSU) with which you and/or the students may be working throughout this experience.

If the trip involves volunteer/service learning or internship opportunities, please describe the exact nature of the activity in which members of the group will be engaged.

Program Staffing

List Leader Qualifications (international travel, experience traveling with students, making group travel arrangements, working closely with students requiring constant oversight, administrative experience, course content, etc.)

Faculty Leader Name:

Additional Leader Name:

Leader Experience in Host Country:

If you have not traveled to the host country, please explain how you can maximize the travel experience for the students.

Program Provider Information (Third Party Vendor/Agency/Host Institution)

If planning to use more than one third party vendor, provide the following information for each one.

Organization Name:

Contact Person Name:

Address (Street, City, State/Province, Country, Postal Code):

Telephone:

Fax:

Website:

Description of Organization/Agency/Provider/Host Institution:

What services will the organization provide prior to departure?

What services will the organization provide on-site?

Proposed Courses

List each course that will be offered on the program.

Department	Course Number	Course Title	Language of Instruction	Credit Hours	Contact Hours	Instructor
Example: Biology	492	Marine and Island Ecology of the Bahamas	English	4	60	Anderson

Are any of the above courses cross-listed with any other courses? YES NO

If yes, please indicate cross-listed courses numbers and titles:

Can the course(s) be taken to fulfill (check all that apply)?

___ Major/Minor Requirements

___ Core Requirements

___ Elective Credit

___ Other: _____

Syllabus Guidelines

A syllabus for each course listed above must be attached to this proposal and should include learning outcomes related to each site destination within the program.

- Outline how many contact hours are planned for each course. This should include any pre-departure preparation students will receive in addition to the general pre-departure orientation provided by CIE. Describe any planned post-program activities/events that are designed to help students process their study away experience. MN State requires 12.5 contact hours per each credit hour awarded.
- Time spent on field trips or academic excursions can count as “contact hours” on a 2-to-1 ratio (i.e., for every two hours spent on an excursion, one hour may be counted as a contact hour).
- Describe how you will *evaluate* the program and *assess* the intended student learning outcomes. List the specific learning goals against which the program will be assessed, and how such assessment will be accomplished.
- For ideas on how to articulate and evaluate learning goals, refer to: [A Self-Directed Guide to Designing Courses for Significant Learning](#)

Budget Worksheet

All faculty-led programs need to be self-supporting, which means all related expenses should be managed through student tuition and/or external funds. At the same time, making sure that programs are affordable for students is also important. Faculty costs must be equal to costs for students' travel excluding tuition. Faculty and their departments should discuss questions related to teaching loads prior to submitting the program proposal.

Below is a typical example of a short-term study abroad program budget. You must however submit a budget that details all costs, and your costs must be based on quotes and not personal estimates. Generally, 10 degree-seeking students is the minimum needed for a program to be offered depending on related expenses.

PRELIMINARY PROPOSED BUDGET	
Faculty Expenses (per leader)	
Room:	\$67.00/night = \$670.00
Meals:	\$150.00
Books & Course Supplies, if applicable:	\$500.00
Health Insurance:	\$36.90
International Airfare:	\$1200
On-site Travel (trains, buses, taxis, etc.)	\$50
Other Travel:	\$100.00 (transport to airport)
Immigration (passport, visas, photos, etc.):	\$135.00
Immunizations/Inoculations:	n/a
Other (entrance fees, orientation, meals, misc.):	\$25.00 (group meal)
Total (based on minimum number of students):	\$2866.90 (less depending on group size)
Student Expenses*	
Tuition (see Business Services for rates):	\$1,206.80 (based on non-res tuition, 4 credits)
Room:	\$670.00
Meals:	150.00
Books & Supplies, if applicable:	\$150 (mask, fins, snorkel, underwater flashlight, wetsuit)
Health Insurance:	\$36.90 (per student)
International Airfare:	\$1200
On-site Travel (trains, buses, taxis, etc.):	\$50
Other Travel:	\$100 (to/from airport)
Immigration (passport, visas, photos, etc.):	\$135.00 (first-time passport)
Immunizations/Inoculations:	n/a
Other (entrance fees, orientation, meals, misc.):	\$25.00 (group meal)
Total (based on minimum number of students):	\$3,723.70

Promotional Brochure Template for Advertising

The following information will be used to develop the program promotional materials. Please note that marketing assistance is provided in the design and website advertising only. Other advertising expenses (printing of hard copies, newspaper ads, etc.) must be included in the budget above.

Program Description:

Course:

Credit Hours:

Instructor:

Class Dates:

Tour Dates:

Registration information:

Price:

Deposit/final payment deadlines: \$xxxx.xx deposit due: TBD. Final payment due: TBD.

Special health/safety/environmental considerations:

Example:

Study Tour: The Art of London and Paris

History comes alive through the iconic landmarks and pageantries of London and Paris. Kings and queens once shaped the course of world history from these two vibrant capitals. Today, both cities boast the essential art, music and culture of a modern metropolis to remain enduring centers of influence. Uncover the treasure – both historic and modern – of these timeless cities on your comprehensive tour of London and Paris.

Course: ARTH 492, ARTH 591: The Art of London and Paris

Credit Hours: 3

Instructor: Carol Geu

Class Dates: January 12, 2009 – March 29, 2009

Tour Dates: March 9-March 16, 2009

Registration Information:

For more information and to register for this course, please attend the Fall 2008 information session at 12 p.m., Monday, Oct. 6, 2008 in McKusick Tech 110.

Price: \$2,594/students (plus self-support tuition) (fee includes round trip airfare, eight overnight stays, complete European breakfast daily, three dinners, full-time bilingual Tour Director, and Eurostar high-speed train).

Deposit/final payment deadlines: \$500 deposit due October 24, 2008. Final payment due December 15, 2008.

Special health/safety/environmental considerations: This program will require considerable amount of walking/traveling each day on uneven cobblestone streets and narrow paths. The group will also use considerable amount of public transportation (both buses and subways) that may not be handicap accessible.

Signatures

Upon approval from the Provost to offer this Education Abroad program, I agree to the following terms:

- I agree to recruit a sufficient (10) number of students to maintain a viable program. The University may approve the program with fewer full-fee-paying students as a first-time program.
- At least 60% of program participants must be SMSU degree-seeking students or alumni within the last four years or degree-seeking students from another college/university.
- I agree to consult with the Center for International Education (CIE) and Business Services before canceling a program.
- I agree to consult with CIE in developing the program costs and include the CIE study abroad fee in the budget.
- I am responsible for organizing program-specific orientation sessions prior to departure and in-country for the program participants.
- I agree to enforce the University Code of Conduct. I agree to submit a Clery Report form within 24 hours to Public Safety - documenting whether any incidents of crime (Clery Act, Title IX) sexual harassment, or accidents/injury occurred during the program.
- I agree to provide Business Services with proper receipts for all program-related expenses within 45 days after return from the program.
- Upon completion of the program, I will provide a Program Report & Assessment to SAGE (submit to the CIE) within 60 days of the end date of the program. The report should include the student learning outcomes and academic goals of the program, if and how these goals were met, what went well, what could improve, and how the international experience enhanced students' learning, etc.

I have reviewed the Faculty-Led Program Guidelines for Education Abroad. To the best of my knowledge, research, and ability, the information provided on the proposal is true and accurate.

_____ Primary Program Leader Name	_____ Signature	_____ Date
_____ Co- Leader Name (if applicable)	_____ Signature	_____ Date
_____ Co-Leader Name (if applicable)	_____ Signature	_____ Date

Approvals

All proposals must have signatures of approval below (steps 1 and 2) before submission to the Center for International Education (CIE) for SAGE review.

Step 1: Departmental Recommendation: YES NO

Chair/Department Coordinator Signature Date

Step 2: Global Studies Committee Recommendation (for courses with the GLOB prefix): YES NO

Chair of GS Committee Signature Date

Step 3: Dean's Recommendation: YES NO

Dean Signature Date

Step 3: Submit proposal to the CIE for review through the SAGE (Study Abroad & Global Engagement) committee.

Step 4: SAGE committee Recommendation: YES NO

SAGE Co-Chair Signature Date

Provost's Approval:

Provost Signature Date

President's Approval:

President Signature Date

Next Steps After Program Approval

Once your Program Proposal is approved, it is essential that you work with the following offices to ensure that your education abroad program details are confirmed, essential services are paid/reserved in advance, required forms for risk and liability are completed, and any orientation and trainings are met before departure and after your return.

➤ Center for International Education (CIE)

- ❖ All Program Leaders & co-leaders must review the **MN State: Board Policy 3.41 Education Abroad Programs** guidance
 - All transportation must be public or chartered. Employees cannot drive vehicles with students while abroad.
 - Students are NOT permitted to drive (includes scooters, motorbikes, motorcycles, or cars) during the program.
 - Alcohol use during scheduled program time is prohibited unless prior approval with the President is obtained.
 - Abide by the laws of the host-country.
 - Contact SMSU if there are any emergencies (accidents/deaths/etc.). Call CIE (507) 537-6018 or email us at cie@smsu.edu if it is during our normal business hours. Call Public Safety during non-business hours so they can contact CIE staff on call.
- ❖ Program leaders & co-leaders must submit the **Employee Acknowledgement of International Travel Risks and Responsibilities**
- ❖ Program leaders & co-leaders must provide **On-site Orientation within 24 hrs** of arrival to program destination
- ❖ Program leaders & co-leaders must complete and submit their certificate/confirmation of their CSA (**Campus Security Authorities**) training of the Clery Act - contact Mike Munford, Director of Public Safety to schedule a training . First Aid training is highly recommended.

- ❖ All participants must submit a **Study Abroad Online Application**, a link will be provided
- ❖ All participants must submit a **copy of their Passport** (photo page with expiry date)
- ❖ All participants must submit the **Individual Health form**
- ❖ All participants must provide a **copy of Health Insurance Card**
- ❖ All participants must **Register with STEP** (US Dept of State Smart Traveler Enrollment Plan)

- ❖ All student participants must submit the **FERPA Release** form
- ❖ All student participants must submit the **Liability Release & Waiver** form
- ❖ All student participants must attend CIE's **Pre-Departure Orientation** – Sign & Submit the **Study Abroad Contract** at orientation

- ❖ **UPON RETURN**, Program leaders & co-leaders must submit a **Program Report & Assessment** to CIE (to be shared with SAGE) within 60 days of your return.
- ❖ **UPON RETURN**, Program leaders & co-leaders must submit a **Clery Report** form within 24 hours to Public Safety - documenting whether any incidents of crime (Clery Act, Title IX) sexual harassment, or accidents/injury occurred during the program.

➤ **Business Services**

- ❖ Request for Approval for **Special Expenses and Out-of-State International Travel Authorization**
 - ❖ Special Course Fee Form/Approval with estimated trip fee - Initiates Account # Set Up
 - ❖ Course Name/Number of credits
 - ❖ Differential Tuition Cost per credit/can be used to cover cost of instructor
 - ❖ Minimum number of students needed to make the trip possible
 - ❖ Health Insurance through Risk Management
 - ❖ Student Travel Contact needs to be completed for financial obligation
 - ❖ Emergency Contact
 - ❖ Payment due dates for travel company
 - ❖ Hotel accommodations/# of rooms needed.
 - ❖ Registration Process for trip/course
 - ❖ Payment and Registration checklist for students
 - ❖ Student Deposits
 - ❖ Financial Aid/notification of trip and estimated amount
 - ❖ Separate Cost Center for trip/responsible person
 - ❖ Requisition to start process/vendor must be in the State Vendor System.
-
- ❖ **UPON RETURN**, Program leaders & co-leaders must submit all program costs & receipts within 45 days of return.

➤ **Registration & Records**

- ❖ Course Name/Number of credits
 - ❖ Registration Process for trip/course
 - ❖ Payment and Registration checklist for students
-
- ❖ **UPON RETURN**,(insert)

➤ **Financial Aid**

- ❖ Financial Aid/notification of trip and estimated amount
-
- ❖ **UPON RETURN**,(insert)

Program Report & Assessment

Please submit final Report & Assessment to the CIE and to SAGE.