

SHORT-TERM OVERSEAS PROGRAM AT ITHACA COLLEGE
Academic/Credit-bearing program proposal form

ITHACA

Please submit proposal to the Office of International Programs (214-2 CHS) by the following deadlines:

- › For 2008-09 winter session programs: September 15, 2008
- › For 2009 spring break programs: October 1, 2008
- › For 2009 summer session programs: October 15, 2008

All Overseas Program proposals must be properly endorsed by the appropriate individuals before they can be approved by the Office of International Programs. Required signatures are listed on page two of this form.

Group Leader _____ Department _____
Phone # _____ E-mail _____
Is this a credit-bearing course? Yes No If yes, how many credits? _____
Estimated number of students _____ Number of faculty/staff accompanying group _____
Location of program _____ Dates of program _____
Program Title and course number _____

Please consider the following questions, and attach requested information to this form:

1. Please provide a thorough description of the overseas program and syllabus for the course.
2. Briefly describe how the development and offering of this program relates to the mission of your specific School and the overall mission of Ithaca College.
3. All credit-bearing overseas programs should be designed to run for a minimum of 3 years, in order to provide continuity in the study abroad options available to students. Please describe how you envision operating for 3 years including other faculty/staff who might be involved.
4. Please describe your previous background in the country that you will be visiting. If the primary language spoken there is not English, please provide information regarding your level of fluency in the primary language of that country, and/or your plans for an interpreter/translator. Include details about how much time you have previously spent in the host country, and approximate dates of your last trip there.
5. If there will be other adults traveling with the group who will be directly involved in the program in an official capacity (i.e. have responsibilities for group supervision, instruction, etc.), please provide a listing of the individuals involved, their connection to Ithaca College, their planned involvement in the program, and how their expenses and/or stipend will be covered.
6. Please complete and submit a Budget Worksheet and a detailed cost breakdown. Both the budget worksheet (in Excel) and a sample cost breakdown are available online at <http://www.ithaca.edu/oip/faculty.htm>
7. While abroad with students, it is your responsibility to insure that students are appropriately supervised. With this in mind, please discuss any plans you may have for your time in the host country that are not directly related to the program (i.e. research projects, independent activities, etc.)
8. If an individual who is not directly involved in the program (i.e. spouse, partner, family member, friend) will accompany you on this trip, please make it known in this application. If you do choose to have guests along on the trip, please provide an explanation of your plans with regard to their presence. (Please note: If children under the age of 18 will be accompanying you, there must be another adult present, preferably the child's other parent, who will be able to care for them while you are involved in program activities)

Program Approval

Faculty/Staff member: before submitting your proposal to the Office of International Programs, please sign and obtain the approval of the individuals listed below. *Park School faculty:* please submit proposal form to the Associate Dean after obtaining the Department Chairperson's signature, and note that Park School equipment cannot be used for study abroad programs.

The information and cost breakdown included in this proposal are accurate as of the date of submission. I understand that any changes to the information contained in this proposal must be approved by the Office of International Programs and the Provost/Vice-President for Academic Affairs.

Faculty/Staff Member

Date

I have thoroughly reviewed this proposal, and it is being submitted with my approval. I know of no reason why this faculty/staff member should not be permitted to take students abroad.

Department Chairperson/Supervisor/Program Director

Date

Dean of School

Date

Faculty/Staff member: After obtaining the above signatures, please submit proposal to the Office of International Programs, 214-2 Center for Health Sciences.

I have thoroughly reviewed this program, and it is being submitted with my approval.

Director of Study Abroad

Date

Director of International Programs

Date

Provost/Vice-President for Academic Affairs

Date