

Faculty Led Program Proposal Form

FACULTY LEADER INFORMATION

Main Faculty Leader: _____ Email: _____ Phone: _____

Replacement Faculty Leader (required): _____ Email: _____ Phone: _____

Secondary Faculty Leader (recommended): _____ Email: _____ Phone: _____

Third Faculty Leader (optional): _____ Email: _____ Phone: _____

Department Accountant: _____ Email: _____ Phone: _____

Is the main faculty leader a graduate faculty member? Yes No

COURSE INFORMATION

Department Code(s) and Course Number(s): _____ Number of Credit Hours: _____

Course Title(s): _____

Year: _____ Term: Fall Semester Spring Semester Summer Semester

Course Start Date (MM/DD/YYYY): _____ Course End Date: _____

On-Campus Meeting Dates (if any, both pre- and post-tour): _____

On-Campus Meeting Location(s) (if known): _____

Minimum Enrollment: _____ Maximum Enrollment: _____

Target Audience: Undergraduate Graduate Other

Prerequisites (if any): _____

Will this program admit non-credit participants? Yes No

Will this program admit non-K-State students? Yes No

STUDY TOUR INFORMATION

Study Tour Period: Fall Break Winter Break Spring Break Summer Other

Departure Date: _____ Return Date: _____

Host Location(s) (Cities and Countries): _____

Are you proposing to travel to a country or region with a U.S. Department of State Level 3 or 4 Travel Advisory? Yes No
<https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html>

Who will book travel?

Faculty Leader(s) Travel Agent: _____

Third Party Provider: _____ Other (please specify): _____

FACULTY LEADER TRAVEL EXPENSES

What total amount of travel expenses, if any, for all leaders will the program pass on to students as part of the student program fee?

- All expenses.** This would be equal to the amount indicated in the Faculty Leader Expenses column of the Program Budget. All leader travel expenses will be passed on to students as part of the program fee. Each individual participating student will contribute toward the faculty leader's costs..
- No expenses.** College Dean's Office, Department, or Other Source agrees to support leader travel expenses to the total amount indicated in the Faculty Leader Expenses column of the Program Budget. None of the leader travel expenses will be passed on to students as part of the program fee. College, Department, or Other Source agrees to have Education Abroad invoice them for all of the expenses listed in the Faculty Leader Expenses column on the Program Budget. Please indicate the funding source/s and amount/s _____
- Some expenses.** College Dean's Office, Department, or Other Source agrees to support a portion of the leader travel expenses, but the remainder of the expenses will be passed on to students as part of the program fee on the Program Budget. Please indicate which expenses or the total amount of the Faculty Leader Expenses the College, Department, or Other Source will cover for leader travel: _____

ADDITIONAL REQUIRED INFORMATION (Please email digital copies to abroad@ksu.edu)

- Course Syllabus**
 - Course Description, Student Learning Outcomes, Required Assignments and any Required Textbooks
- Study Tour Daily Itinerary**
 - Start and End Dates, Academic Activities for Each Day of Study Tour, Excursions
- Program Rationale and Implementation Plan**
 - Faculty leader's experience in host country, Rationale for proposing the course/program, Marketing and Recruitment Plan
- Program Budget**
 - Faculty Leader Expenses (if passing on to students), Out-of-pocket Expenses, Program Expenses
- Cost Documentation for Airfare, Lodging, Transport, and Excursions** (printouts from travel sites, agent quotes, etc.)
- Supplemental Information as applicable**
 - Contact Information for Main Leader While Abroad
 - Addresses and Contact Information for All Accommodations Abroad
 - Contact Information for Travel Agent, Other Institutions, Third Party Providers, Organizations, or Governments Involved (If Needed)
 - Information regarding Expected Non-Student Participants (Assistant Staff or Students, Faculty-Leader Family Members or Guests, Community Members)
 - Travel Warning Statement (If Traveling to a US DoS Level 3 location)
 - Documentation and Rationale for Driving Abroad (If Faculty Leaders Intend to Drive)

COMPENSATION

Education Abroad is not involved in compensation for faculty led programs. Any compensation for teaching a course as part of a faculty led education abroad program is determined by the instructor's Academic College and Department in consultation with the faculty leader. By signing below, the faculty leader, department, and college have agreed that they have discussed any compensation arrangements for teaching this course.

APPROVAL SIGNATURES

I have read, understand, and agree to the Faculty Led Programs Policies and Procedures on the Kansas State University Education Abroad website at https://www.k-state.edu/abroad/faculty/fac_led/fac_led_policies/introduction.html

Main Faculty Leader: _____ Date: _____

Replacement Faculty Leader: _____ Date: _____

Second Faculty Leader (if any): _____ Date: _____

Third Faculty Leader (if any): _____ Date: _____

Department Head(s): _____ Date: _____

College Dean(s): _____ Date: _____

OIP Office Use Only:

Assistant Director of Education Abroad or Advisor: _____ Date: _____

Director of Education Abroad: _____ Date: _____