

Faculty-Led Program Abroad Proposal Form

Directions: Submit this form with all required supporting documents to your Chairperson and Dean. After signatures have been obtained, submit the proposal and supporting documents to **Devika Milner at studyabroad@miami.edu**. For more information, call 305-284-3434.

Eligibility:

- All programs are required to operate in partnership with an on-site program provider. A list of preferred program providers is on page 2 of this form. In limited cases, a university partner offering a full array of support services can serve as a program provider.
- All programs must have a minimum of 2 UM faculty/staff present for the duration of the program. All faculty, teaching assistants, and graduate assistants must be current UM graduate students or faculty. **Full-time staff are not eligible to serve in this role. Undergraduate students may not serve in a TA capacity.**
 - Co-instructor/TA must be identified and confirmed by December 1st (Intersession/Spring Break programs) or January 20th (Summer Programs)

Submission Deadline:

Deadline: August 1, 2023 for 2024 programs

Late/incomplete proposals will not be accepted

PART I: FACULTY INFORMATION

| | | | | | |
|----------------------------------|--------|-----|--------------------------------|--------|-----|
| Faculty Director Name and Title: | | | Co-Instructor Name and Title: | | |
| School/College and Department: | | | School/College and Department: | | |
| Phone: | Email: | C#: | Phone: | Email: | C#: |

PART II: PROGRAM INFORMATION

This program will be offered ([select one](#)): January Intersession Spring Break Summer A Summer B Summer C

Program Name as it will appear in advertisements: _____

Program Location(s): _____

Exact Program Dates: _____ Faculty Travel Dates: _____

Course Code(s): _____ Number(s): _____ Section: SAP Number of Credits: _____ Level (U or G): _____

If this program will offer course equivalencies in different departments, approvals should be obtained in writing by the Faculty Director from all relevant Department Chairs and Deans.

In general, a minimum of 10 students is required to offer a program. In some cases, a higher minimum is required, depending on budgetary details.

PLEASE PROVIDE THE FOLLOWING DETAILS IN THE SPACE BELOW:

Name of Intended Program Provider:

Brief Description of the program (2-5 sentences to be used on our website, promotional materials, social media posts, etc.)

Course Content – how will the course integrate the overseas location? State the targeted academic and cultural learning outcomes of the course.

Pre-requisites – does this course have any requisites or prerequisites?

PLEASE SUBMIT THE FOLLOWING AS ATTACHMENTS:

- A. Description of faculty and co-instructor responsibilities.** Please address the specific responsibilities of each faculty member and/or program/teaching assistant before, during, and after the program in detail.
 - B. Course syllabus/syllabi.** The syllabus should address the required readings, educational activities, attendance policy, and culturally orienting activities.
 - C. Detailed program itinerary.** This should include a sample/proposal from the program provider. Describe the logistics of the program, including the accommodations, cultural excursions, transportation, third party services, need for contracts with vendors, and support staff responsibilities. Any updates that might impact the budget should be submitted as soon as possible.
 - a. Health & safety plan.** A comprehensive health and safety plan following guidance from UM Risk Management and Emergency Management. Your program provided should be able to provide this easily.
 - D. Academic continuity plan.** Provide contingency plans for scenarios if an instructor as well as if a student is unable to attend classes/excursions
 - E. Course Budget.** The budget planning form is available at <https://studyabroad.miami.edu/faculty-and-advisors/faculty-led-programs/index.html>
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All programs will be required to operate with an onsite program provider. A list of preferred program providers appears below:

- | | | |
|---------------------------------|-------------------------------|------------------------|
| • AIFS | • CET | • JTB |
| • API Abroad | • CIEE | • SAI |
| • Barcelona SAE | • CIS Abroad | • SIT |
| • CAPA | • IES Abroad | • TEAN |
| • CEA | • IFSA-Butler | • USAC |

PART III: SIGNATURES

Faculty Director and Co-Instructor: Please check off each statement below to indicate your understanding and agreement to meet these requirements.

- 1. I will abide by the deadlines for UM Courses Abroad and understand that my course abroad may be cancelled due to unforeseeable events (e.g. health concerns, weather, political unrest, etc.) or if the minimum enrollment is not met.
Faculty Director _____ Co-Instructor _____
- 2. I will abide by the [Electronic Travel & Business Expense Reimbursement Policy](#).
Faculty Director _____ Co-Instructor _____
- 3. I attest that I am willing and able to lead this course abroad and take responsibility through the course completion.
Faculty Director _____ Co-Instructor _____
- 4. In the event that I am unable to complete a course that is in progress, I agree to assist the School/College in finding and selecting a replacement Faculty Director.
Faculty Director _____ Co-Instructor _____
- 5. I attest that if I make any change to the program I will inform the Study Abroad office of that change and also inform all applicants, especially if the change modifies the itinerary, dates or costs.
Faculty Director _____ Co-Instructor _____
- 6. I attest that any program changes (e.g. logistics, fees, dates) will be made before the program application deadline.
Faculty Director _____ Co-Instructor _____
- 7. I understand that if the program is approved, that attending the Faculty-Led Programs Workshop is mandatory in order for me to lead a course abroad.
Faculty Director _____ Co-Instructor _____
- 8. I understand it is my responsibility to communicate to student applicants who withdraw from the program, that they will forfeit the \$500 deposit and any non-recoverable costs, including program fees, incurred on their behalf.
Faculty Director _____ Co-Instructor _____
- 9. I understand that UM requires me to reconcile my travel within ten (10) days of my return. If I fail to reconcile my expenses within a month of my return, I will not be permitted to take a travel advance for a future program. Furthermore, unreconciled expenses may be taken from my paycheck.
Faculty Director _____ Co-Instructor _____
- 10. I understand that the program will not be approved if I have any outstanding expenses or reimbursements pending from a past trip.
Faculty Director _____ Co-Instructor (if applicable) _____

Faculty Director Signature: _____ Date: _____

Co-Instructor Signature: _____ Date: _____

Department Chair: By signing below, I attest that this course abroad proposal meets the stated academic and cultural outcomes, as well as the scholastic standards of the department required for the award of stated course credit as determined by the faculty. I attest that I have received and reviewed the attached course syllabus. I further attest that there are no conflicts of commitment that would preclude the Faculty Director from leading this course during the time proposed.

Signature: _____ Printed Name: _____ Date: _____

If providing students with a Course Equivalency in another department, complete this section. (Copy form as needed)

Course Code(s): _____ Number(s): _____ Section: SAP Number of Credits: _____ Level (U or G): _____

Second Department Chair: By signing below, I attest that this course abroad proposal meets the stated academic and cultural outcomes, as well as the scholastic standards of the department required for the award of stated course credit as determined by the faculty. I attest that I have received and reviewed the attached course syllabus.

Signature: _____ Printed Name: _____ Date: _____

Dean: By signing below, I attest that this course abroad proposal meets its stated academic and cultural outcomes, and I approve its listing. I further approve and endorse the Faculty Director being assigned to lead this course abroad as described therein. I concur with the Department Chair's assessment of the academic merit of the course.

Signature: _____ Printed Name: _____ Date: _____