

## Study Abroad: Faculty-Led Proposal

This is a proposal to teach a course abroad. Please submit the form and all required documentation to the portal by the February 4<sup>th</sup> deadline.

### FACULTY LEADER INFORMATION

Faculty Leader Name:	
Department:	
Dean:	
Email:	
Phone:	

Additional Faculty Name:	
Department:	
Dean:	
Email:	
Phone:	

### COURSE(S) INFORMATION

Please include all courses and cross-listed courses if applicable. All courses taught abroad should have Senate approval and already be listed in section tally. Specific sections can be created for study abroad course.

Course Number:	
Course Title:	
Credits:	
Contact Hours on campus:	
Contact Hours abroad:	

## GENERAL PROGRAM INFORMATION

Program Term Option:

Spring course with an international component during spring break or Maymester

Summer course

January/winter intersession course

Program Name: (this should not be the Rowan course title – it needs to be a catchy title to draw attention. Keep it brief!	
Program Dates:	
Program destinations: please list all cities/countries	

As you continue to plan your study abroad program, we ask that you reflect on how these experiences can enhance your course pedagogy. Please take time to read below and answer the next section in detail. To make an informed decision regarding your proposal, the Education Abroad Committee will need a detailed explanation as to how these themes are connected between your course and the itinerary abroad.

1. How will this program offer real-world examples for classroom discussions and hands-on learning?

2. How will this experience abroad deepen students' understanding of cultural competence and global issues?

3. What interdisciplinary connections exist between your course material and the program destination? We understand that certain iconic experiences are natural to include—such as visiting the Trevi Fountain when in Rome—even if they do not directly relate to your course content. However, most of your itinerary should be intentionally aligned with the academic themes of the course. We want to ensure there is a clear and meaningful connection between the course objectives and the activities you’ve planned abroad.

4. Reflective Practice: How will you incorporate reflections on your travels into your teaching, or future programs? Will there be any reflective assignments that are required for the completion of your course?

Use the chart below to provide a detailed explanation of how the itinerary abroad and places visited will related to your course and/or what learning outcomes should occur after visiting such places.

Day	Location/Visit	Relation to the course/Learning Outcomes
Day 1		
Day 2		
Day 3		
Day 4		
Day 5		
Day 6		
Day 7		
Day 8		
Day 9		
Day 10		
Day 11		
Day 12		
Day 13		
Day 14		
Day 15		

## PROVIDER PROGRAM INFORMATION

To provide adequate logistical support and meet safety standards faculty are asked to work with one of our approved program providers. This will limit the number of vendors, improve services and reduce financial transactions on the ground. This will also allow the faculty leaders to focus on the academic piece while the providers handle the rest.

Please check which provide you've chosen to run the program:

WorldStrides                      American Institute for Foreign Study (AIFS)                      EF Tours  
 The Asia Institute                      World Wide Adventures India                      World Endeavors                      Other

Provider's Contact Name/Email:	
Minimum number of enrollment:	

\*\*Please note that Rowan requires 3 more students than the minimum number from the provider.

### Program Inclusions

Please review your contracts carefully to ensure you know what exactly is included in the program fees so we can promote the program and its costs accurately.

Accommodations                      excursions                      meals  
 classroom space                      ground transportation                      tour guides  
 International flights                      on-site transportation                      resident staff  
 Medical insurance                      travel insurance

**ESTIMATED PROGRAM BUDGET:**

Please complete the Estimated Program on the following page. This will be sent to all students to ensure their understanding of the total program cost.

# STUDY ABROAD

## Faculty Led Program Budget

Leading Professor: ..... Provider: .....

Program Title: .....

Program City & Country .....

### Estimated costs PRIOR to the program

EXPENSES	COST
Passport/Visa	
Airfare	
Application Fees	Rowan Study Abroad App Fee: \$100
Provider Fees	
Rowan Course (1-3 credits)	After registering for the course, if you remain under 17 credits your tuition bill will stay the same. You may use your financial aid toward this portion of your program.

### Estimated Costs DURING the program

EXPENSES	COST
Personal Expenses	
Meals	

**Grand Total:**

## GLOBAL RISK ASSESSMENT

This rubric is designed to enable the Study Abroad Committee (SAC) to assess faculty-led short-term study abroad proposals in terms of potential associated risk. Faculty should make sure to address each of the stated areas. While scores of zero (0) and two (2) should be clear, here are some examples of why a score of one (1) might be given.

- **Political Stability:** Global unrest or extreme difference between area of trouble and proposed site visit.
- **Health Risks:** Available care below US standard or possible health problems due to lack of sanitation or proper food preparation.
- **Criminal activity:** Known area of tourists being preyed upon and/or weak police or military forces.
- **Advance Site Visit:** Limited knowledge of area but has traveled internationally without students.

	0	1	2	SCORE
<b>POLITICAL STABILITY</b>	Unknown, reported, unclear, or high risk of government instability, negative USSD travel advisory	Minor risk of instability, USSD advisories limited to areas distant from site	Stable government, no travel advisories	
<b>HEALTH RISKS</b>	Unknown, reported, unclear, or high risk of government instability, negative USSD travel advisory	Limited health risks	Little likelihood of health concerns, high quality medical care readily available, handicapped accessible	
<b>CRIMINAL ACTIVITY</b>	Unknown, reported, unclear, or high risk of criminal activity	Limited criminal threat	Little threat of criminal activity	
<b>ADVANCE SITE VISIT</b>	Limited international travel experience or experience traveling with students	Limited knowledge of area, has traveled internationally but without students	Significant experience onsite, has traveled internationally with students	
<b>FACULTY COORDINATOR LANGUAGE PROFICIENCY</b>	None or limited fluency in the local language, English is not spoken in the area	English is common in area, faculty leader has passing knowledge of local language, can find help or assistance with ease	Near fluent in local language(s)	
<b>TOTAL</b>				

If a score of zero (0) or one (1) is expected in a particular category on this rubric, please explain in the space below the ways in which the Faculty leader plans to address those issues.

## EMERGENCY PREPAREDNESS

Faculty Member's First & Last Name:	
Faculty Member's Emergency Contact Name:	
Relationship to Faculty Member:	
Cell Phone Number of Emergency Contact:	

Emergencies Abroad:

Does your provider have a Resident Staff person (24/7) dedicated to help you throughout the program?

YES      NO

If not, according to your provider, please explain what is the protocol in case of an emergency?

What is the international number of the on-call unit for your provider?

Please discuss the items below with your provider so that you are aware of what you can expect while abroad.

- a. If an emergency arises, does the provider have a staff person who can accompany a student to the hospital or medical facility?      YES      NO
  
- b. Is a translator available to go with the student to a medical facility if needed or desired?  
YES      NO

### 9-1-1 Abroad

9-1-1 only works in the U.S., Canada, and parts of the Caribbean. Please refer to the PDF below to find the equivalent for the countries to which you're traveling. It is suggested that you add this to a NOTE in your phone so that you can easily access it while abroad. [https://travel.state.gov/content/dam/students-abroad/pdfs/911\\_ABROAD.pdf](https://travel.state.gov/content/dam/students-abroad/pdfs/911_ABROAD.pdf)

## DEAN APPROVAL

A faculty member from your department has submitted a proposal to lead a group of students on a study abroad program. This program offers a unique and enriching experience for our students, aligning with the university's goals of fostering global awareness and academic excellence.

As part of the approval process, we kindly ask you to review the attached proposal, which includes details of the program, budget, and itinerary. Additionally, please complete the checklist below, which outlines the proposed expenses that the academic department would be willing to cover on behalf of the traveling faculty member(s) during the program.

Below is the checklist of proposed expenses for the upcoming faculty-led study abroad program. Kindly review and approve the items and corresponding maximum amounts.

### 1. Please check off all that the Academic Department is willing to cover and indicate the maximum amount.

- Per Diem for Faculty
  - Maximum Amount: \$\_\_\_\_\_ per day
- Accommodation (room upgrades)
  - Maximum Amount: \$\_\_\_\_\_ per night
- Travel to/from airport (Uber, Lyft)
  - Maximum Amount: \$\_\_\_\_\_ roundtrip
- Checked Baggage Fees
  - Maximum Amount: \$\_\_\_\_\_ roundtrip
- Any other expenses that may arise, subject to approval (emergencies abroad – i.e. purchasing medicine for a student, purchasing hotel room for a sick student etc.- please discuss what these terms would be with your faculty member)
  - Maximum Amount: \$\_\_\_\_\_ per day

If the academic department is unable to cover the proposed expenses for the study abroad program, the faculty member leading the program will need to decide whether to personally cover the costs or cancel the program. Please consider this when reviewing the proposal, as the decision to proceed will depend on available funding and the faculty member's willingness to bear any additional expenses.

### 2. Minimum Enrollment

- a. Generally, providers will run a program with at least a minimum of 8 students. Please indicate the minimum number of students that must participate for Rowan to run this course successfully. If this number is not met, the faculty member can try the following year to get more students.
- b. Minimum number of students to run the program: \_\_\_\_\_
- c. Minimum number of students to add an additional chaperone: \_\_\_\_\_

### 3. Chaperones/Additional Faculty

The International Center's policy requires that any additional chaperones be from the same college or school. An additional faculty chaperone is warranted only if there are at least 10 student participants. Additionally, the costs for an extra chaperone should not be funded by student fees. If the number of students justifies the need for an additional chaperone, the arrangement may proceed, but all related financial details must be approved according to the established guidelines.

- Per Diem for Faculty
  - Maximum Amount: \$\_\_\_\_\_ per day
- Accommodation (room upgrades)
  - Maximum Amount: \$\_\_\_\_\_ per night
- Travel to/from airport (Uber, Lyft)
  - Maximum Amount: \$\_\_\_\_\_ roundtrip
- Checked Baggage Fees
  - Maximum Amount: \$\_\_\_\_\_ roundtrip
- Any other expenses that may arise, subject to approval (emergencies abroad – i.e. purchasing medicine for a student, purchasing hotel room for a sick student etc.- please discuss what these terms would be with your faculty member)
  - Maximum Amount: \$\_\_\_\_\_ per day

#### APPROVAL:

By signing this form, I fully support the abovementioned faculty member's intentions to lead a study abroad program through Rowan University. I approve the proposal to move on for final review by the Education Abroad Committee.

Name of Academic Dean: \_\_\_\_\_

Approval Signature: \_\_\_\_\_

Date: \_\_\_\_\_

#### FOR THE FACULTY MEMBER:

By signing this form, I, \_\_\_\_\_ intend to lead a study abroad program through Rowan University. I understand that it is my responsibility to read and fully understand the policies, procedures and responsibilities within the Faculty-Led Handbook during the proposal process and through to the program ending.

Name of Faculty Member: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_