

UNIVERSITY of NORTH CAROLINA PEMBROKE

Faculty-Led Study Abroad/Away Proposal

(DUE 9 MONTHS PRIOR TO TRAVEL)

I. BASIC PROGRAM INFORMATION

(Will the students receive credit on this program? Then the FLSA Proposal is required.)

Program Title: _____

_____ New Proposal _____ Recurring Proposal

Program Departure Date: _____ **Program Return Date:** _____

Program Location(s): _____

Faculty-Lead: _____

Department: _____ **Office #** _____

Phone #: _____ **Email:** _____

Assistant Lead (faculty/staff), unless using a Third-Party Provider*:

**Faculty are allowed to lead a Study Abroad/Away program on their own, if they are using a third-party company that provides 24/7 comprehensive, on the ground, and in-country support. Consult with the Study Abroad Coordinator.*

Department: _____ **Office #** _____

Phone #: _____ **Email:** _____

II. ACADEMIC INFORMATION

Will this be one (1) class or a two (2) class collaboration? _____ **1 class** _____ **2 classes**

How will each faculty member be compensated for instruction?

Course Number(s): _____ **Credits:** _____

Are there any prerequisites for the class? _____ **Yes** _____ **No**

If Yes, what are they? _____

Are there any program requirements? _____ **Yes** _____ **No**

If Yes, what are they? _____

III. PROGRAM DETAILS

- 1) **Program Narrative** – including objectives and expectations
- a) Rationale for the program (Why is the program being offered?)
 - b) Main features (What will students do?)
 - c) Learning objectives?

- 2) **Course Syllabus** – Attach to the Proposal, outlining justification for Study Abroad/Away.

- 3) **Budget** – Create a projected budget. (See template below.) What are the expected program expenses? Be as accurate as possible. Students are expected to cover all expenses, including themselves and faculty. Add an additional 10-20% to the total cost to ensure that funds will cover all expenses.

- 4) **Suggested Itinerary** -- Attach with this FLSA Proposal. Faculty also agree to fly with the students, as a group. (See Appendix E in FLSA Manual/Handbook for more information.)

- 5) **Risk Assessment** –

- a) What is the U.S. Department of State’s Travel Warning for the destination(s)? Check the boxes after review and circle the appropriate Travel Warning below. Provide additional details as needed. *(Study Away / domestic travel – skip to section 5b.)*

- I have reviewed the [U.S. Department of State’s Travel Warning](#) for the proposed county of study abroad from the link above.
- I have reviewed the most recent [U.S. Department of State’s Overseas Security Council](#) Crime & Safety Report for the destination and listed any relevant risk factors below.
 - a. **Travel Warning 1** (Approved, no justification needed. However, it’s important to always list risk factors for any travel, so please list below.)
 - b. **Travel Warning 2** (Approved with written justification listed below in the Risk Factors section.)
 - c. **Travel Warning 3** (Written appeal to The Office of Global Engagement justifying travel to this country and specific areas within the proposed itinerary.)
 - d. **Travel Warning 4 (NOT ALLOWED)**

- b) **Safety / Risk Factors** – List any risks associated with program destination(s) and provide additional details for ensuring overall safety of the Study Abroad/Away group trip:

Third-Party Service Providers – If any services will be arranged by an in-country provider, please provide all documentation associated with the insurance, licenses, etc., as warranted. If you would like to use a third-party service provider, like EF Tours, then consult with the Study Abroad Coordinator. They can submit a Request For Proposals (RFP), on the faculty’s behalf, to providers for a financial quote of the in-country itinerary.

BUDGET ESTIMATE

(This is a basic guideline. Adjust as necessary or use your own budget worksheet. And remember to include all faculty expenses in the program cost to accurately determine the total approximate cost.)

Transportation

Flights: _____ USD (flights to and from the host country, in-country flights)

Ground: _____ USD (bus, train, taxi, other)

Lodging

Hotel 1: _____ USD _____ (local currency as needed)

Hotel 2: _____ USD _____ (local currency)

Other: _____ USD _____ (local currency)

Meals

Welcome Dinner: _____ USD _____ (local currency)

Good Bye Dinner: _____ USD _____ (local currency)

Other: _____ USD _____ (local currency)

Excursions

Museums, historic sites, cultural events, guided tours, etc:

_____ USD _____ (local currency)

Immigration

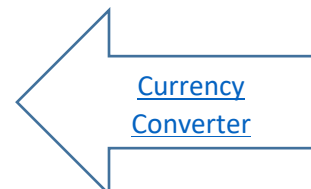
Visas: _____ USD

Health

Student Insurance: _____ \$25 p/person _____ USD (not needed for Study Away)

Immunizations: _____ USD (consult Travel.State.Gov)

Faculty Costs



Remember to use [Chrome River online](#) and note that faculty [reimbursements must be submitted within 30 days](#) after the trip is completed!

Airport Parking: _____ USD

Per Diem: _____ USD

Faculty Insurance: _____ \$25 p/person _____ USD (not needed for Study Away)

**Remember to add an additional 10-20% to the total. Use the below total for promotional purposes.*

Total Cost: _____ USD **Total Cost per Student:** _____ USD

Faculty Lead Signature: _____ **Date:** _____

(By signing this document, faculty agree above information is accurate and agree to facilitate the safety and well-being of the group.)

III. SIGNATURE SECTION

Department Chair

Signature: _____ Date: _____

Dean

Signature: _____ Date: _____

Associate Provost

Signature: _____ Date: _____

Research Compliance Officer (not needed for Study Away, i.e. *domestic* programs)

Signature: _____ Date: _____

Associate Vice Chancellor of Global Engagement

Signature: _____ Date: _____