Study Abroad Program Proposal

Please complete this Proposal Form in full, and submit it to a member of the Study Abroad Sub-Committee of the International Education Committee. The Sub-Committee will evaluate the proposal. Please also include related e-mailed or mailed correspondence – such as Invitation Letters, Institutional Profiles – that you believe would be useful to the Sub-Committee. The deadline to propose a December and/or January program is **April 1st**. The deadline to propose a Spring Break program is **May 10th**. The deadline to propose a Summer program is **November 1st**.

Your Name:  

Department:  

Please circle one:  

Full-Time Faculty  

Adjunct Faculty  

Telephone:  

E-mail:  

Proposed Study Abroad Destination(s):  

Proposed Leader(s):  

Course(s) to be taught and units:  

Term and Year:  

Possible Travel Contractor:
Study Abroad Program Proposal

QUESTIONS

On separate pages, please respond to each of the following questions:

1.) Please explain the nature of the proposed program. Include details on time, duration (include start and end dates) and content.

2.) Please explain the benefit to Ohlone students of participation in the proposed program. Please list the Student Learning Outcomes (SLO) the program intends to achieve.

3.) Please briefly describe your international travel experience.

4.) Please describe, as specifically as possible, how you will recruit for the study abroad program. For example, list the kinds of meetings, advertising and promotion you plan.

* Participating faculty of Ohlone College must meet minimum qualifications requirements, as assessed by the Sub-Committee, in the proposed discipline of instruction.

Your Name (printed) ____________________________________________________________________________
Signature __________________________ Date __________________________

Dean’s Name (printed) __________________________________________________________________________
Signature __________________________ Date __________________________

For Study Abroad Sub-Committee Use Only

Date Reviewed by Sub-Committee: __________________________

DECISION

Approved as Submitted
Approved with Amendments (attached)
Declined

APPROVALS

Vice President, Academic Affairs:
Signature __________________________ Date __________________

President __________________________ Date __________________