

**Dr. George H. Bennett Office for International Education
Virginia State University
STUDY ABROAD PROGRAM PROPOSAL**

Faculty Name

Office Location

Department

School

Phone

Email

P.O. Box

PART I: PROGRAM PROFILE

1. Title of Program and Number of Credit Hours

2. Brief program description: (50 – 75 words)

3. Proposed Destination (city/cities and country/countries):

4. Proposed Time Period of Program: (X)

Summer _____ /No. of weeks: _____ Semester _____ Academic Year _____

Indicate specific dates, if known: _____

5. Host institution(s)/agency assisting with in-country logistics:

6. Names of collaborating institutions, departments, and/or schools, if any

7. Language requirement for this program? Yes _____ No _____

If yes, specify language AND proficiency level required for participation (beginner, intermediate, advanced, etc.)

Language of instruction _____ Proficiency level _____

8. Approximate cost per student. (Specify whether program fee includes travel and tuition. Attach a budget worksheet. Figures may change after site visit has been completed.

\$ _____

9. Courses for which VSU students will receive credit. (Please note that for short programs—less than a semester long—students need to earn at least 6 semester hours to access their federal financial aid.)

Course #	Cr Hrs	Course Title	Grade Options

Other course credit available (explain):

10. Faculty member(s) assuming duties of program coordinator(s)

Name Department / School

Name Department / School

Complete Part II: Study Abroad Program Narrative and attach it to this form.