



INSTRUCTIONS	PROPOSAL CHECKLIST
<p>Please review the Faculty Led Program Proposal Guidelines before beginning.</p> <p>STEP 1: Complete this form.</p> <p>STEP 2: Add required attachments (syllabus, budget proposal, etc.).</p> <p>STEP 3: Obtain department chair and dean approvals.</p> <p>STEP 4: If approved, deans will submit proposal to CIESA for next steps.</p>	<p><input type="checkbox"/> Approved course(s)</p> <p><input type="checkbox"/> Travel dates</p> <p><input type="checkbox"/> Pre- and post-travel class dates</p> <p><input type="checkbox"/> Preferred classroom location</p> <p><input type="checkbox"/> Course syllabus/syllabi (attached)</p> <p><input type="checkbox"/> Draft budget (attached)</p> <p><input type="checkbox"/> Chair/dean approval</p>

PROGRAM INFORMATION

PRIMARY PROGRAM LEADER	DEPARTMENT AND COLLEGE	EMAIL AND PHONE
SECONDARY PROGRAM LEADER	DESTINATION COUNTRY	PREFERRED PROGRAM PROVIDER(S)
TRAVEL START AND END DATES	PRE- AND POST-TRAVEL CLASS DATES	PREFERRED BOSTON CLASSROOM LOCATION
<p>SECONDARY LEADER DESCRIPTION:</p> <p>Suffolk full-time faculty Suffolk staff member</p> <p>All program decisions should be discussed with your department heads before submitting this program proposal.</p>	<p style="text-align: center;">U.S. DEPARTMENT OF STATE TRAVEL ADVISORY LEVEL**</p> <p><input type="checkbox"/> 1 Exercise normal precautions</p> <p><input type="checkbox"/> 2 Exercise increased caution</p> <p><input type="checkbox"/> 3 Reconsider travel</p> <p><input type="checkbox"/> 4 Do not travel</p> <p>Visit the U.S. Department of State website to find out the travel advisory level for your destination and to review specific safety information.</p> <p>**Not required for domestic or virtual programs</p>	

Remember that you can reach out to Study Abroad at any time with questions or to ask for support as you complete this form.

StudyAbroad@suffolk.edu

COURSE(S) TO BE TAUGHT BY PRIMARY LEADER ON THIS PROGRAM	COURSE CODE(S)	CREDIT HOURS
COURSE(S) TO BE TAUGHT BY SECONDARY LEADER OR PROGRAM PROVIDER ON THIS PROGRAM, IF APPLICABLE	COURSE CODE(S)	CREDIT HOURS

APPROVALS

DEPARTMENT CHAIR NAME	SIGNATURE	DATE	SU EXTENSION
DEAN NAME	SIGNATURE	DATE	SU EXTENSION

IMPORTANT DATES

Program proposals are due **May 15** for the following academic year.
RFP Form will be due by **June 15**
Program budgets must be finalized by **August 1st** following program approval.

Questions? Please contact us:

617-573-8034
StudyAbroad@suffolk.edu