



Term: Fall Winter Spring Summer August Year: _____

This template is to be used only for programs approved in previous years for the same country(ies). Submit the complete form and required attachments to your [Education Abroad College Liaisons](#) by the deadlines: **February 1** (winter/spring programs), **May 1** (summer including May and August programs), **October 1** (fall). Please contact your education abroad college liaison or Education Abroad if you have questions, and visit: global.tamu.edu/ea/program-development/faculty-led.

The Texas Higher Education Coordinating Board (THECB) is mandated by law to certify courses taught abroad. For more information, please contact Education Abroad fiabroad@tamu.edu.

PROGRAM FACULTY

Lead Faculty for the Proposed Program

Name: _____
Department: _____ Mailstop: _____
Email: _____ Phone: _____

Other Texas A&M faculty members teaching in this program:

Name: _____
Department: _____ Mailstop: _____
Email: _____ Phone: _____

Add additional teaching faculty on a separate sheet

COURSE(S) TO BE TAUGHT OVERSEAS

Please include cross-listed and reciprocal exchange holding courses if available.

Course Prefix & Number: _____
Course Title: _____
Credit hours: _____ Contact hours (note the standard is 15 contact hours per credit hour): _____
Faculty of record for this course: _____

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Course Title: _____
Credit hours: _____ Contact hours (note the standard is 15 contact hours per credit hour): _____
Faculty of record for this course: _____

Add additional courses on a separate sheet

COURSE REQUIREMENTS:

Non-traditional approvals: All study abroad courses are taught in non-traditional duration (catalog attribute). If not already approved, they must be submitted through your department and the Curricular Approval Request System (CARS) as soon as possible.

International and Cultural Diversity (ICD) course and Cultural Discourse (CD) courses: If you are teaching a course that is not designated as ICD or CD and plan to pursue ICD or CD for the section you are teaching abroad, please include the applicable form attached to this proposal. Your college representative will route the request and paperwork to your AOC Dean for approval (signature page 4).

List the course(s) you plan to offer for ICD or CD: _____



PROGRAM GENERAL INFORMATION

Program name: _____

Dates of program: _____

Locations(s) abroad: _____

What was the program enrollment for the past three years? _____

If adding a new country, submit course syllabi showing how the academic content relates to the new location.

Indicate if you plan to use either Texas A&M University location abroad and include a note acknowledging availability:

Texas A&M University at Qatar (Dr. Hazem Nounou, Senior Associate Dean, hazem.nounou@qatar.tamu.edu)

Soltis Center for Research & Education in Costa Rica (Eugenio Gonzalez, Director, egonzalez.soltis.center@tamu.edu)

Are there any significant program developments that have enhanced the study abroad experience since the last time the program was taught? If so, please describe them: _____

STUDENT INFORMATION

Target number of student to take on the program: _____

Minimum number of students for the program to run: _____

Departments you will recruit from: _____

Eligible Classifications (ex. U2, Grad): _____

Course prerequisites, if any. Please indicate if prerequisites can be waived. _____

If multiple courses, how many credits will students be required to take: **Min:** **Max:**

IN COUNTRY PARTNERS FOR LOGISTICS

To provide adequate logistical support, meet safety standards, and university contractual requirements, faculty are asked to work with a provider: university partner and/or third-party provider. This will limit the number of vendors, improve service, and reduce financial transactions on the ground. If you need to find a provider, contact Education Abroad for a list of suggested partners before completing this form.

Please fill out the information below about your program's logistical arrangement and partnership.

Name of institution/provider you will work with: _____

Contact Person's name and email: _____

Web address (if any): _____

What will the partner provide? Select all that apply:

accommodations: classroom/lecture space: group transportation: excursions: meals:

accommodations host families: apartments: hosted: hotel:

in-country transportation internal flight: public bus: coach: train:

Have you worked with this vendor before? Yes: No:

Do you have a quote from the partner or vendor? Yes: No:

If yes, please include the document with the proposal.

Texas A&M University
FACULTY-LED PROPOSAL for Recurring Programs



TEXAS A&M UNIVERSITY
Education Abroad

If you have an additional provider, please include all the above information about the provider below.

*Attach any relevant institution or third-party provider's proposal, quote, or correspondence you have received for this program.



Preliminary Risk Assessment

The primary concern of all programs traveling abroad is the wellbeing, health, and safety of its participants. Program plans must demonstrate clear understanding of the risk environment and detail appropriate risk mitigation strategies. Many risks can be mitigated through thoughtful program design, pre-departure education, and consulting knowledgeable sources. Education Abroad is available to assist in developing security, health, and safety program protocols with you.

Refer to the EA information at: <https://global.tamu.edu/ea/program-development>. Additional resources: [TAMU Extreme and High Risk Countries](#), [U.S. Department of State](#), [Centers for Disease Control and Prevention](#).
 Using each category below, please indicate the risks that may affect your program.

Potential Risks to Health, Safety, & Security: Yes: No: *If yes, mitigation measures to plan*

- Terrorism _____
- Civil unrest _____
- Criminal activity _____
- Natural disasters _____
- Infectious diseases _____
- Water and food safety _____
- Other (ex. transportation) _____

Program Activities and Itinerary

Program excursions and activities (cultural and academic) are an inherent part of study abroad programs and should be listed in the itinerary, as well as any optional activities. Please list the program activities you plan to offer and address student preparation and risk mitigation measures.

Please review the University International Insurance plan from CISI for [Exclusions and Limitations](#) (pp. 8-9). Program leaders are advised to review this document before planning activities.

Planned Activities	Preparation and Risk Mitigation Measure to be adopted
<i>Ex: walking/hiking</i>	<i>Inform applicants of walking and fitness (2-5 miles/day). Practice</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

NOTE: We understand that some activities and/or visits are subject to change after approval of this proposal. Please keep in mind the assessment and mitigation considerations when finalizing your itinerary.



PROPOSAL CHECKLIST

- Complete all sections of the proposal form, including signatures. The funding section should be signed.
- Include a syllabus for each course that is being added to the original approved proposal.
- Include a preliminary itinerary for the program, including any planned courses, field experiences, and other activities during the course or pre/post departure from the U.S.
- The signature of the dean's delegate will be obtained by your education abroad college liaison(s).
- Include a CV (no longer than two pages) for each faculty member.
- Verify that all the courses proposed have received approval to be taught in non-traditional duration.
- If requesting International and Cultural Diversity (ICD) or Cultural Discourse (CD) for study abroad course(s), attach the ICD or CD request form with an additional copy of the syllabus to be reviewed by the AOC Dean.
- Submit a signed proposal and supporting documents to your [Education Abroad College Liaison](#) by the below deadlines.

Term Deadlines to your Education Abroad Liaison:

Your college will forward the proposal to Education Abroad once it is complete and approved. Late submission may not be accepted by the college or, if approved, the program may be managed by the department offering the course(s).

Spring/Winter – **February 1**

Summer including May and August programs – **May**

1 Fall – **October 1**



SIGNATURE SECTION -All signatures below are REQUIRED

For all sections, add additional signatures on a separate page if needed

Faculty Signature: As a faculty member leading this abroad program, I agree to:

1. Participate in faculty pre-departure trip-leader briefing either in person or virtually within 12 months of departure.
2. Provide pre-departure sessions for participating students
3. Comply with working fund and all other regulatory guidelines

Faculty Signature: _____ **Date:** _____

Faculty Signature: _____ **Date:** _____

Funding: The following is/are responsible for the faculty member's salary for this abroad program (select all that apply):

College: _____ **College Dean Approval** **Signature:** _____

Dept.: _____ **Departmental Head Approval** **Signature:** _____

Other: _____ **Signature:** _____

Academic Departmental Approval: My signature below indicates that:

1. The proposed course(s) to be taught outside the U.S. meet all departmental standards
2. I will assign a workload percentage on faculty workload reports to the faculty member(s) who teach the courses (s)
3. Final faculty name(s) for the program and location-specific syllabus per course will be provided to the Education Abroad no later than one-semester prior to departure

Department name: _____

Dept. Head name: _____

Signature: _____ **Date:** _____

College Liaison Approval: My signature below indicates that:

1. My signature below indicates I have reviewed this proposal and confirm it is complete.

College name: _____

Liaison name: _____

Signature: _____ **Date:** _____

My signature below indicates college authorization of the proposed course(s) to be taught outside of the U.S., which I attest meet(s) all college standards.

College: _____

College Dean Delegate Name: _____

Signature: _____ **Date:** _____



Information for faculty interested in teaching a Study Abroad course for **International and Cultural Diversity (ICD)** or **Cultural Discourse (CD)** credit.

1. The ICD/CD approval process is embedded in the Education Abroad Course Approval Process.
2. Course will be approved as ICD/CD by section; only the section taught abroad will carry the ICD/CD attributes.
3. Course sections that receive the ICD/CD designation must meet all of the learning outcomes associated with these attributes.
4. Course section approval will go through a condensed approval process, which rests with the AOC (Undergraduate) Dean of the college under which the course is being taught.
5. Course sections must be approved as ICD/CD each time they are taught as Study Abroad or International Field Trips UNLESS the course has been approved by the Core Curriculum Committee and already designated as ICD/CD.



International and Cultural Diversity Course Section Request

- 1. Course prefix and number: _____
- 2. Complete course title: _____
- 3. Department submitting request: _____
- 4. Name of person submitting request: _____
- 5. Email address: _____

6. **List and describe specific assignments and activities** that achieve each of the following ICD Learning Outcomes. Be sure to review the ICD rubric for specific requirements (Recertification will require evidence of these activities and how they aided students in achieving the required learning outcomes.

a) Live and work effectively in a diverse and global society.

[Empty text box for response to item a)

b) Articulate the value of a diverse and global perspective.

[Empty text box for response to item b)

c) Recognize diverse opinions and practices and consider different points of view.

[Empty text box for response to item c)

7. Attach the current course syllabus.

Submitted by: _____

Signature: _____ Date: _____

Department Head: _____

Signature: _____ Date: _____

AOC Dean/Dean's Designee: _____

Signature: _____ Date: _____



Cultural Discourse Course Section Request

- 1. Course prefix and number: _____
- 2. Complete course title: _____
- 3. Department submitting request: _____
- 4. Name of person submitting request: _____
- 5. Email: _____

- 6. Is this course open to all majors? Yes (required for approval): No:
- 7. Does this course have prerequisites other than classification? Yes: No (required for approval):

8. **List and describe specific assignments and activities** that achieve each of the following goals in the Cultural Discourse Framework. Be sure to review the CD rubric for specific requirements. (Recertification will require evidence of these activities and how they aided students in achieving the required learning outcomes.)

a) Hold respectful discussions and discourse on different topics.

b) Understand self, including personal bias on difficult topics.

c) Understand the power of authority is distributed within organizational systems, including recognizing potential forms of privilege, oppression, and discrimination.

d) Understand, as an overarching goal, how to use and promote informed dialogue to overcome issues dividing, not uniting, individuals and humankind.

e) Understand tolerance and have a knowledge of when it is appropriate to be intolerant of specific behavior/activities that violate our core values as people and Aggies.

f) Understand how to function effectively in multicultural and global society.

g) Understand conflict from multiple viewpoints.



9. **List and describe ways in which the course will address the following CD requirements:**

a) Incorporates "Aggie Experience Activities" into the course

b) Incorporates small group discussions into the course.

10. Attach the current course syllabus.

Submitted by: _____

Signature: _____ Date: _____

Department Head: _____

Signature: _____ Date: _____

AOC Dean/Dean's Designee: _____

Signature: _____ Date: _____