

Please complete and submit this form to the assistant director of study abroad in the International Center with proposed changes to existing programs, such as timing, location, course offering, program leader, etc.

ORIGINAL PROGRAM INFORMATION

Title of the program: _____

Program location(s): _____
city(s), country(s)

Term(s) offered: Winter break Summer Spring break

Number of weeks for the program: _____

Faculty program director: _____

Department: _____ Email: _____

Additional program director: _____

Department: _____ Email: _____

Course number(s) and number of credits: _____

INTENDED PROGRAM CHANGES

Please provide a brief summary of intended program changes.

Form prepared by: _____

Signature: _____ Date: _____

INTERNATIONAL CENTER APPROVAL

Signature: _____ Date: _____
James Scott, director of the International Center