



Faculty-Led Program Proposal

Office of International Relations & Global Engagement
Woodburn Hall 115 | Tel: 605-642-6942 | Email: international@bhsu.edu

I. PROGRAM DETAILS

Faculty Leader Information:

Name _____
Department _____
College _____
Division Chair _____
College Dean _____

Co-faculty Leader Information:

Name _____
Department _____
College _____
Division Chair _____
College Dean _____

Program Information:

Program Name _____
Course Number and Prefix _____
Course term (FA, SP, SU) _____
Number of Credits _____
Location (City and Country) _____
Dates of Travel _____

II. ON-SITE LOGISTICS

How will on-site logistics be organized and managed?

_____ Third-party provider _____ Internally at BHSU _____ Host University _____ Other

If using a third-party provider or host university, please provide the following information:

Name of Org or Univ _____
Contact Name _____
Telephone _____
Email _____
Address _____

Have you or another BHSU faculty member ever offered a program using this third-party provider or university to deliver a faculty-led program through BHSU?

_____ Yes _____ No

If yes, provide the program name, faculty leader, and year:

If no, please explain how and why you identified this third-party provider or host university:

Will an on-site coordinator, in addition to the faculty, be available?

_____ Yes _____ No

If yes, provide a short explanation of their role (24/7, only during excursions, etc.).

If no, please explain how on-site logistics will be managed while on-site, and explain how the academic nature of the program will be preserved if faculty is/are managing logistics.

Using the space below, please provide a rough draft of your proposed itinerary for the on-site portion of the program. Add an attachment if you need more space.

Proposed Program Itinerary		
Date	Location	Short Description of Activity

If you need more space, you may attach a separate document in lieu of completing the table above.

III. ACADEMIC DETAILS

Is the course proposed for this program a unique course (i.e. is this a new course, or one which will only be used for future faculty-led programs in your division?)

_____ Yes _____ No

If yes, has this course already been approved through the university and/or BOR course approval process?

_____ Yes _____ No

Please provide a short course description, below. Alternatively, you may attached a draft syllabus.

Please provide 3-5 learning outcomes. Alternatively, you may attach a draft course syllabus.

Briefly explain how the location(s) of the program relate to course content, and provide examples of how the location will be used to achieve the learning outcomes.

BOR policy specifies that each credit hour must consist of 15 contact hours and 30 hours of student work, or a total of 45 hours of student work for field-based and other “nontraditional” modes of learning (<https://www.sdbor.edu/policy/Documents/2-32.pdf#search=contact%20hours>). For faculty-led programs, you may use non-classroom based learning activities (e.g. academic excursions or site visits) toward contact hours based on 1:2 ratio (e.g. a 4-hour long excursion = 2 hours of contact).

Please outline, below, how your course will achieve the appropriate number of contact hours.

Proposed Course Meetings/Contact Hours		
Date	Location	Number of contact hour

If you need more space, you may attach a separate document in lieu of completing the table above.

IV. PROGRAM FINANCES

Please indicate the appropriate contract type for the proposed course (you should consult with your division chair, dean, and/or the Director of IRGE before determining this).

_____ Overload _____ Summer-pay _____ Inload

In the space provided below, please provide an itemization of estimated costs for this program. A good guideline for determining if costs are appropriate is a target of \$2000 per 7 days, inclusive of airfare. This is based on good practices outlined in NAFSA’s Faculty Led Programming Handbook.

Estimated Program Budget

1. Faculty Expenses (all expenses should be estimated per faculty):

Item	Estimated Cost	Source of cost estimate, description
RT Airfare		
Airport parking		
Per diem (max \$45/day)		
Housing		
On-site transport		
Entrance fees, other on-site expenses, misc.		
Insurance (\$1.15/day)		
Faculty Subtotal	\$	

Estimated Program Budget

2. Student Expenses (all expenses should be estimated be per student):

Item	Estimated Cost	Source of cost estimate, description
RT Airfare		
Included meals		
Housing		
On-site transport		
Entrance fees, other on-site expenses, misc.		
Guest lecturers, honorees, etc.		
Other group expenses		
Insurance (\$36.90/30 days)		
Student Subtotal	\$	

If you need more space, you may attach a separate document in lieu of completing the table above.

(See next page for required approval signatures)

V. PROGRAM APPROVALS

Before submitting this proposal to the Office of International Relations and Global Engagement for review and final approval, please ensure the document has a signatures completed. You may email the completed form to Eric.Leise@bhsu.edu, or drop off the hard copy in Woodburn Hall 115. Electronic signatures are acceptable (i.e. you can attach emails indicating approval).

Faculty: _____ Date _____

Division Chair: _____ Date _____

College Dean: _____ Date _____

Co-faculty: _____ Date _____

Division Chair: _____ Date _____

College Dean: _____ Date _____

Director, IRGE _____ Date _____

Provost/VPAA _____ Date _____