Please complete and submit this application form with the relevant accompanying materials to your Chair/Supervisor at least three months prior to your anticipated travel dates. Please note that Saint Leo’s policy now stipulates that TWO faculty/staff members must participate in each international trip. Applications and supporting materials must be approved by the Dean’s office or your relevant supervisor. Please then forwarded the application package to david.felsen@saintleo.edu for review by the Internationalization Committee (IC). Once approved, trip details can be publicized with University Communications at news@saintleo.edu. Pre-departure preparation must include at least one orientation session for participants. At the orientation session, you must review relevant risk assumption forms and have them signed by participants.

Basic Information:

The purpose of this trip is (circle one):
Faculty-led short-term study/ Other (if Other, please specify)___________________

The trip will be offered:
Fall 20__/Spring 20__ / Summer 20__ / Winter 20__/ Other (please indicate)____________________________________________________

Primary Faculty/Staff Member Name: ____________________________
School/Department: __________________________________________
Chair/Direct Supervisor_____________________________________
Phone: _______________________ Email:_________________________

Secondary Faculty/Staff Member Name: ____________________________
School/Department: __________________________________________
Chair/Direct Supervisor_____________________________________
Phone: _______________________ Email:_________________________

Name of Study Trip:____________________________________________
Proposed Dates:________________________________________________
Proposed Location:_____________________________________________
Course Number:_____ Title: _______________________________________
Number of Credits:______________________________________________
Please Submit:

A. Course Information – 1) Course title 2) Course syllabus 3) Learning objectives 4) Readings
B. Proposed budget for the trip (use budget form available on SLU International web pages)
C. Itinerary - detailed program itinerary, including flight details, lodging, transportation, tour/travel logistics, cultural excursions, third party services, support staff responsibilities
D. Brief trip leader biographies (1 page each) listing off-campus/international experience of the SLU faculty/staff members
E. Risk management confirmation email - trip details should be entered onto an excel spreadsheet (available at SLU International web site) to be logged into the SLU risk management system

Authorizing Signatures:

Faculty/Staff Lead Signature:

I attest that I will complete necessary program logistics, collect all relevant fees, and hold an orientation session for students to answer questions in advance of the trip and have students sign all relevant assumption of risk forms.

Faculty/staff lead signature________________________________________
Date:

Chair/Supervisor Signature:

I attest that this course proposal meets the stated academic standards/service goals of the department and the mission of the university.

Chair/Supervisor signature: _______________________________________
Date:

Dean’s Signature:

I attest that this trip has been reviewed and meets the academic standards/service goals of the university.

Dean’s signature: _____________________________________________
Date:

Faculty attendance to present trip to IIC required: YES _________ NO ____________

Risk Management email appended to the application: YES _______ NO __________
IIC Representative’s Signature:

The IIC has reviewed the trip. It has met our requirements and has been approved.

IIC Committee representative signature: __________________________

Date: