2025 Faculty Led Program Proposal The FLP proposal and all supplemental materials must be submitted to the CGF

	nenow@utulsa.edu by March 25, 2024. All proposals must be submitted via email.		
	No course will be formally approved until it receives formal approval from the Curriculum Committee.		
Proposal Checklist:			
□ Proposal Form			
☐ Course syllabu			
 Detailed Proposed Itinerary if not included in the form. 			
•	ocedure Acknowledgment form.		
Proposal won't be considered unless we receive the 4 items above.			
Faculty Leader	*The faculty member(s) teaching the course must be teaching at TU the semester preceding the proposed travel course.		
Faculty Leader			
Name:			
Title:			
Telephone:			
E-mail:			
Sponsoring			
department:			
Department Chair:			
College Dean:			
Is there a co-			
instructor? If so,			
name, title and e-			
mail address:			
Brief Program			
Description			

Program Learning Objectives	
Objectives	
Proposed Course	
Title:	
Course number:	
Department:	
Language of	
instruction:	
Credit hours:	
Contact hours:	
Level:	☐ Graduate
	☐ Undergraduate
Course cross listed?	
What requirements	□ Major/minor
does the course	☐ Core Requirement
fulfill?	☐ Block I/ II/ III
	□ Other
Term:	□ Fall Break
	☐ Fall extension (December)
	□ Spring Break
	□ Spring Extension (May)□ Summer 1
	□ Summer 2
	☐ January term stand alone
	☐ January term preceding a Spring semester class
	☐ January term after a Fall semester class
	☐ Don't know yet
Course has approval	Yes No Comments:
of Curriculum	
Committee?	
Course has approval	Yes No Comments:
to count as Block?	
Course has approval	Yes No Comments:
to count as HCGD	
requirement?	
Program Logistics	Please note that all travel to locations currently under a U.S. Department of State
Dun ann all a c	levels 3-4 must be approved by the Risk Committee.
Program sites: (cities and countries):	
, 	
Course start date:	

Course end date:	
On site duration (in days):	
Date of departure from the US:	
Date of return to the US:	
Language	
proficiency	
required:	
Please list any	
experiential	
components of the	
program, including	
service-learning,	
field work or	
research	
opportunities	
Proposed Itinerary	This is the place to indicate everything you would like to see/visit/do while you are
	in-country. You could consider this a "wish list" of activities.
Date	Location and Activity

Student Enrollment	All students enrolled in the course section must complete the travel component of
	the course.
Minimum and	
maximum number	
or students	
From which	
departments do	
you expect there	
to be student	
interest?	
From which	
departments will	
students be	
recruited?	
Participant	
eligibility	
requirements in	
excess of CGE SA	
requirements (i.e.	
major, academic standing, minimum GPA, prerequisites,	
faculty permission, statement	
of interest etc.)	
Program Staffing	List Leader Qualifications (international travel, experience traveling with students,
	making group travel arrangements, working closely with students requiring
Landa	constant oversight, administrative experience, course content, etc.)
Leader	
qualifications:	
Leader experience	
in host country:	
Additional	
information:	
Preferred Program	(Third Party Vendor/Agency/Host Institution) If planning to use more than one third
or Travel Provider	party vendor, provide the following information for each one.
Information	If you do not have a preferred provider, please indicate "No Preference" in the
	provider name below.
Provider name:	
Contact person	
name:	
Address	
Telephone/ email:	
Website:	
Description of the	
organization:	
What services will	
the organization	
provide prior to	
departure?	

What services will	
the organization	
provide on-site?	
Budget Worksheet	The budgeting process will be ongoing and the CGE does not expect a budget to be finalized at this time. A budget template will be created upon the creation of your course, and you can have access to it at any time.
Student costs:	
Flights	
Tours:	
Hotel/Hostels:	
Local	
transportation:	
Meals:	
Other:	
Faculty costs:	
Flights:	
Tours:	
Hotel/Hostels:	
Local	
Transportation:	
Meals:	
Other:	
Contingency	
expenses:	
Are there	
department/College	
subsidies for this	
course? How much?	
Is there another	
source of funds for	
this course? (Grant,	
gift, etc.) How	
much?	
Syllabus guidelines	A syllabus for the course listed above must be attached to this proposal and should include learning outcomes/goals for the program.
Signatures	I have reviewed the Faculty-Led Program Guidelines Document. To the best of my knowledge, research, and ability, the information provided on the proposal is true and accurate.
Primary Faculty	
leader name,	
signature, and date:	
College Associate	
Dean signature and	
date:	
College Dean	
signature and date:	