

## EMBEDDED STUDY ABROAD PROPOSAL

1. Faculty member \_\_\_\_\_ Department \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

2. Course name \_\_\_\_\_ Course number \_\_\_\_\_  
(if existing course)

Course description \_\_\_\_\_

\_\_\_\_\_

3. Proposed destination \_\_\_\_\_

Proposed activity \_\_\_\_\_

4. **Risk management.** Do you have a program partner or university partner in country?  Yes  No

If yes, please list \_\_\_\_\_

If no, will you be using one of the Study Abroad pre-approved program partners (link to list)?  Yes  No

If yes, please list \_\_\_\_\_

If no, who will you be working with in country to provide logistical support and amenities (e.g. housing, classroom space, local excursions, transportation, meals)? \_\_\_\_\_

\_\_\_\_\_

5. **Program marketing.** How will you promote this embedded study abroad course to students?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. **Availability of scholarships | Matching funds.**  Yes  No

If yes, please list award and potential amounts \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please complete this form and send it to [global@ucsd.edu](mailto:global@ucsd.edu)