



**Bethel University – College of Arts and Sciences**  
**Office of Off-Campus Programs/International Studies**

**Interim Abroad and Off-Campus**  
**Existing Course without Modifications (i.e. seasoned faculty, same location)**  
**Statement of Intent**

Please complete the following Statement of Intent if the course you intend to offer has already been approved, the location remains the same, and you have had previous experience leading it. If this is an existing course with modifications (i.e. new location or new faculty leading for the first time), please complete the yellow form, Existing course with Modifications Proposal.

**Statement of Intent: due October 1, 2021 for term 2022 / interim 2023 programs**  
**(Note: Completed course budget form is due on March 15, 2022)**

**I. GENERAL INFORMATION**

Today's Date:

Course Number and Title:

Bethel Course Instructor(s):

E-mail:          Phone:          PO:          Office:

Sponsoring Department(s):

Location(s) of the Program:

Program Length (be specific, a minimum of 20 days off-campus is required, plus two days for travel):

Dates of Program:

**II. ADDITIONAL FACULTY/STAFF/FAMILY/FRIENDS**

***Note: All participants who are not registered students must receive prior approval in advance from the Associate Provost (CAS).***

If you hope to have family members, friends, or anyone else accompany you during the program, please provide a rationale for their participation (if children, please include age). Contact the Associate Provost to request permission for them to accompany the program. If approved by the Associate Provost, these individuals must bear all expenses such as airfare, lodging, meals, and any other incidental expenses.

**Name                  Rationale**

*(Approval from the Associate Provost is required for any financial compensations to course assistants. All payees must have a W-2 form on file at Bethel.)*

**Are you planning on hiring a Teacher's Assistant? Yes  No           How many?**

*(Please note that only CAS students registered to participate in your course for academic credit can be hired as a teaching assistant (TA). Please use the Short-Term Stipend Request form from Financial Planning to request payment for your TA.)*

**SUPPORTING SIGNATURES:**

Each faculty must get supporting signatures from the following parties in the following order:

- 1) Departmental Chair(s), if two different departments are involved, each department chair must sign
- 2) Divisional Associate Dean(s), if two different divisions are involved, each must sign
- 3) Associate Provost (CAS)
- 4) Associate Dean of International and Off-Campus Programs

**STEP 1: APPROVAL from DEPARTMENT CHAIR**

**Faculty Leader 1:** \_\_\_\_\_ **Department:** \_\_\_\_\_

**Faculty Leader 2:** \_\_\_\_\_ **Department:** \_\_\_\_\_

**We have discussed the following:**

1. Course Number/Title: \_\_\_\_\_ Credits: \_\_\_\_\_

We have discussed the course content, the roles of all faculty, staff, and anyone else accompanying the program.

2. Financial Issues

Minimum number of students needed to make the program financially feasible: \_\_\_\_\_

Maximum number: \_\_\_\_\_

3. Name of alternate leader (if any): \_\_\_\_\_ Department: \_\_\_\_\_

**Department Chair Approval for Faculty Leader 1:**

I approve the initial proposal and forward it to the divisional dean for review.

Date: \_\_\_\_\_

Faculty Member name: \_\_\_\_\_

Department Chair name (print): \_\_\_\_\_

Department Chair signature: \_\_\_\_\_

**Department Chair Approval for Faculty Leader 2:**

I approve the initial proposal and forward it to the divisional dean for review.

Date: \_\_\_\_\_

Faculty Member name: \_\_\_\_\_

Department Chair name (print): \_\_\_\_\_

Department Chair signature: \_\_\_\_\_

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**STEP 2: SUPPORT from DIVISIONAL ASSOCIATE DEAN**

**Divisional Associate Dean for Faculty Leader 1:**

I approve the initial proposal and forward it to the Associate Provost (CAS) for review.

Date: \_\_\_\_\_

Faculty Member name: \_\_\_\_\_

Divisional Dean name (print): \_\_\_\_\_

Divisional Dean signature: \_\_\_\_\_

**Divisional Associate Dean for Faculty Leader 2:**

I approve the initial proposal and forward it to the Associate Provost (CAS) for review.

Date: \_\_\_\_\_

Faculty Member name: \_\_\_\_\_

Divisional Dean name (print): \_\_\_\_\_

Divisional Dean signature: \_\_\_\_\_

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**STEP 3: SUPPORT from ASSOCIATE PROVOST OF ACADEMIC AFFAIRS (CAS)**

I approve the initial proposal and forward to the Associate Dean of International and Off-Campus Programs and the International Studies Committee for review.

Date: \_\_\_\_\_

Associate Provost's signature: \_\_\_\_\_

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**STEP 4: SUPPORT from Associate Dean of International and Off-Campus Programs**

I have reviewed the complete proposal and fully support this program.

Date: \_\_\_\_\_

Associate Dean of International and Off-Campus Programs signature:

\_\_\_\_\_

# Off-Campus Interim Course Budget

Date:
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Course: \_\_\_\_\_

Submitted by: \_\_\_\_\_

This budget is based on the minimum target enrollment of \_\_\_\_\_ students. *Remember, a minimum target enrollment of 15 is required for one instructor and 25 for two. If this course is going for the first time, the minimum is 10 students for one instructor and 20 students for two.*

Program Expenses	(Be sure to include faculty expenses.)	Group Total	per student (optional)
A.	<b>Airfare (Be sure to include \$80-\$100 check baggage fees)</b>	\$ _____	\$ _____
B.	<b>Provider Services</b> (if using a provider, please mark the categories covered with an *)	\$ _____	\$ _____
C.	<b>Land Travel</b>	\$ _____	\$ _____
	Rail	\$ _____	\$ _____
	Local (bus, subway, local trains, ferry, etc.)	\$ _____	\$ _____
D.	<b>Lodging</b>		
	Location 1	\$ _____	\$ _____
	Location 2	\$ _____	\$ _____
	Location 3	\$ _____	\$ _____
	Location 4	\$ _____	\$ _____
E.	<b>Meals</b> (Breakfast ____ Lunch ____ Dinner ____ )	\$ _____	\$ _____
F.	<b>Instructional Costs</b> (fill in appropriate categories as needed)		
	Events (tickets, admission, excursions, other)	\$ _____	\$ _____
	Facility rental (classroom, studio space, etc.)	\$ _____	\$ _____
	Guest lectures honorarium	\$ _____	\$ _____
	Stipend for host country liaisons	\$ _____	\$ _____
	Supplies	\$ _____	\$ _____
	Long-distance phone calling or FAX	\$ _____	\$ _____
	Texts (inclusion optional)	\$ _____	\$ _____
G.	<b>Interim administrative fee (\$150/student)</b>	\$ _____	\$ 150
H.	<b>Miscellaneous expenses</b>	\$ _____	\$ _____
	Entrance/exit fees	\$ _____	\$ _____
	Post-trip debriefing	\$ _____	\$ _____
	Other (explain) _____	\$ _____	\$ _____
	_____	\$ _____	\$ _____
	<b>Subtotal</b>	\$ _____	\$ _____
I.	<b>Contingency/Emergency Fund (5% of subtotal)</b>	\$ _____	\$ _____
	<b>Total</b>	\$ _____	\$ _____

Divide total by minimum target enrollment.

**Total Cost Per Student**

\$	\$