

International Agreements Routing Form

Agreement Information

Title of agreement: _____

Agreement Type: Academic Services Agreement Agency Agreement Articulation Agreement
 Faculty-Led Study Abroad Proposal MOU

Initiator: _____ Date: _____

Background:

Please explain financial and university commitments:

Signatures

- Academic Services Agreement: CEEGE, Provost, President
- Agency Agreement: CEEGE, Provost, President
- Articulation Agreement: CEEGE, Provost, President
- Faculty-Led Study Abroad Proposal: CEEGE, Department (Chair or Dean), Risk Management

Chancellor's Office approval obtained? Yes No N/A Date: _____

Date: _____

CEEGE Dean *(if applicable)*

Date: _____

College Representative *(if applicable)*

Chair Dean

Date: _____

Risk Management *(if applicable)*

Date: _____

Provost

Date: _____

Please sign original document.

President