

**COLLEGE OF ARTS AND
SCIENCES STUDY ABROAD
SALARY FORM**

(Note: Approval by Dean required prior to program proposal submission to OIED)

Summer Study Abroad Program Leader/Co-Program Leader Salaries:

Program Leader: _____

Program Co-Leader: _____

Country(s) of Destination: _____

Trip Dates: _____

Proposed Minimum Enrollment: _____

- Program Leader Salary Calculation (Select Only One Salary Option)**
- 8% of 9 month salary
 - 1st Time Trip Leader - 10% of 9 month salary
 - Teaching six hours with a minimum enrollment of 10 students - 16% of 9 month salary
 - Salary based on enrollment times the student credit hours generated **(Low Enrolled Programs Only)**. (Example 5 students x 3 credit hours x \$142 = \$2,130 Total Salary)

Note: Salary is based on the minimum enrollment. If minimum enrollment is not met, the Dean reserves the right to adjust the program's salaries based on enrollment or cancel the trip.

- Program Co-Leader Salary Calculation (Select Only One Salary Option)**
- 8% of 9 month salary
 - Teaching six hours with a minimum enrollment of 10 students - 16% of 9 month salary
 - Salary based on enrollment times the student credit hours generated **(Low Enrolled Programs Only)**. (Example 5 students x 3 credit hours x \$142 = \$2,130 Total Salary)

Note: Salary is based on the minimum enrollment. If minimum enrollment is not met, the Dean reserves the right to adjust the program's salary based on enrollment or cancel the trip.

Course Information (Required Only for Summer Study Abroad Programs): List below all of the Study Abroad Courses you're proposing, the instructor(s) name, and the credit hours per course.

| | | |
|----------------|----------------------|---------------|
| Course Number: | Instructor (s) Name: | Credit Hours: |
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Academic Year - Study Abroad Program Leader/Co-Program Leader Salaries:

Salary Amount: Stipend of \$1,000 per program director

Please submit a one-time payment form to the College of Arts and Sciences after the Study Abroad trip is completed.

Program Dates and Location: _____

Program Leader's Name: _____ Co-Program Leader's Name: _____

Program Leader's Signature & Date:

Co-Leader's Signature & Date:

College of Arts & Sciences Dean's Signature & Date:

- Salaries Approved
 Salaries Not Approved

FOR CAS USE Only: