

**HOFSTRA UNIVERSITY  
NEW STUDY ABROAD PROPOSAL FORM**

Program Sponsor's Name: \_\_\_\_\_

Program Title: \_\_\_\_\_

Department: \_\_\_\_\_

Program Period: \_\_\_\_\_

Chair's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Dean's Comments: \_\_\_\_\_  
\_\_\_\_\_

Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Provost Office Budget Comments: \_\_\_\_\_  
\_\_\_\_\_

Provost Office Budget Review: \_\_\_\_\_ Date: \_\_\_\_\_

Finance Office Budget Comments: \_\_\_\_\_  
\_\_\_\_\_

Finance Office Budget Review: \_\_\_\_\_ Date: \_\_\_\_\_

Provost's Comments: \_\_\_\_\_  
\_\_\_\_\_

Provost's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This approval is subject to the satisfactory completion of all documentation and verification and the issuance of a formal confirmation letter.

**Required Attachments:**

Proposal including:

Academic Merits of the Program, Student Accommodation Plan, and Budget