**Travel Study Proposal**

**Course Contact Hours**

Course Title:

Course Number:

Faculty Leader(s):

Program Location:

**Breakdown of contact hours:**

|  |  |  |
| --- | --- | --- |
| **Proposed Pre-departure, on-site, and debriefing classes** | **Instruction Hours** | **Non-Instruction Hours** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Total** |  |  |

**Comments:**