

**New Application for Field Study
The University of Georgia**

Applications must be signed and submitted in their entirety to the Office of Curriculum Systems, Vice President for Instruction, by January 1 for the following academic year.

Date: _____

School/College/Unit _____

Department _____

Program _____

Contact Information:

Name of person completing this form _____

Address _____

Phone number _____

E-mail address _____

In order to use this application, the field study program or course must meet the following criteria:

- Students or faculty will participate in travel to locations beyond the main campus.
- The instructional time required at locations beyond the main campus must exceed 60 percent of the total instructional time.
- Students will be required to travel to destinations within the United States that are remote to the main campus. Travel may include tours of museums, archaeological digs, geological or wildlife field sites, etc., where the site constitutes an important resource for instruction. (A course that requires only minimal short distance field trips does not qualify.)

The application is for:

_____ individual course(s)

_____ set of courses leading to eligibility for a certificate, endorsement, or other credential (specify) _____

_____ degree program (specify) _____

Is more than 60% of this program taught off-campus? Yes _____ No _____

Anticipated start date: _____

Program length covered by application:

_____ one semester

_____ multiple semesters needed for a single group of students to complete one set of courses; number of semesters needed _____

_____ on-going until review required; new groups of students starting every semester or at set intervals

List the locations beyond the main campus in which the students receive instruction and the approximate amount of time in each location:

List prefix, course numbers, and course titles for all courses included in this program:

Describe the relationship between the courses(s)/program covered by this application and the ongoing instructional unit program:

Anticipated graduate/professional credit hour production the first semester: _____

Anticipated undergraduate credit hour production the first semester: _____

Anticipated revenue from tuition for the first fiscal year: _____

**New Application for Field Study
Business Plan for the First Fiscal Year**

Date: _____

School/College/Unit _____

Department _____

Program _____

Account number _____

Contact Information:

Name of person completing this form _____

Address _____

Phone number _____

E-mail address _____

**New Application for Field Study
Business Plan for the First Fiscal Year**

	Funded from tuition	Other funding**	Total
Participation Number of students Number of courses to be offered Graduate Undergraduate Credit hour production			
Revenue (total tuition revenue) Tuition Other funding** Total revenue (tuition revenue plus other funding)			
Expense Personnel Services Faculty UGA faculty salaries UGA extra compensation Part-time faculty Faculty subtotal Graduate teaching assistants Permanent salaried employees Temporary hourly assistants Administrative support Total personnel services Non-personnel services Travel Operating supplies and expense Recruiting and marketing Computer software/licenses Honorarium Administrative supplies Other** Operating subtotal Equipment Total non-personnel services Total expense			
Program totals Anticipated March 1 actual			

*Is a tuition differential assessed to this degree program? Yes _____ No _____

**Explain other.

Please be sure to include the total estimated program fees and cost per student.

An annual budget report will be required for all programs/courses which receive approval for field study.

**New Application for Field Study
Approval/Denial Sheet**

School/College/Unit _____

Department _____

Program _____

Approvals:

Department Head _____ Date _____

Director _____ Date _____

Dean _____ Date _____

Dean of Graduate School _____ Date _____

Vice President for Instruction _____ Date _____

Approved _____ Denied _____

Senior VP Finance _____ Date _____
and Administration

Approved _____ Denied _____

SVPAA and Provost _____ Date _____

Approved _____ Denied _____

Percentage of tuition to be returned: _____

Start date: _____

After consideration by the Senior Vice President for Academic Affairs and Provost, please return the completed application to the Office of Curriculum Systems, 116 Franklin House.

**Annual Budget/Expense Report
Due: March 1**

Date: _____

School/College/Unit _____

Department _____

Program _____

Account number _____

Contact Information:

Name of person completing this form _____

Address _____

Phone number _____

E-mail address _____

Annual Budget/Expense Report
Due: March 1

	Fiscal Year 20____		Fiscal Year 20____
	Anticipated	Actual	Anticipated
Participation			
Number of students			
Number of courses to be offered			
Graduate			
Undergraduate			
Credit hour production			
Revenue (total tuition revenue)			
Tuition			
Other funding**			
Total revenue (tuition revenue plus other funding)			
Expense			
Personnel Services			
Faculty			
UGA faculty salaries			
UGA extra compensation			
Part-time faculty			
Faculty subtotal			
Graduate teaching assistants			
Permanent salaried employees			
Temporary hourly assistants			
Administrative support			
Total personnel services			
Non-personnel services			
Travel			
Operating supplies and expense			
Recruiting and marketing			
Computer software/licenses			
Honorarium			
Administrative supplies			
Other**			
Operating subtotal			
Equipment			
Total non-personnel services			
Total expense			
Program totals			
Anticipated			
March 1 actual			

*Is a tuition differential assessed to this degree program? Yes_____ No _____

**Explain other.

Please be sure to include the total estimated program fees and cost per student.

An annual budget report will be required for all programs/courses which receive approval for field study.

Approvals:

Department Head _____ Date _____

Director _____ Date _____

Dean _____ Date _____

Graduate School _____ Date _____

Vice President for Instruction _____ Date _____

Senior VP Finance _____ Date _____
and Administration

Approved _____ Denied _____

SVPA and Provost _____ Date _____

Approved _____ Denied _____

Percentage of tuition to be returned: _____

Start date: _____

After consideration by the Senior Vice President for Academic Affairs and Provost, please return the completed application to the Office of Curriculum Systems, 116 Franklin House.