

STEP 1:
Global Learning Virtual Exchange
Preliminary Proposal

Please submit to michelle.ensminger@ttuhsce.edu.

Due date: 90 days prior to date of exchange

Proposal Overview

TTUHSC Faculty Leader:

Virtual Exchange Program Name:

Collaborative Partner:

Collaborative Partner's Institution/Organization (if applicable):

Purpose/Summary (provide as many details as possible):

Exchange Model:

- Student-to-student
- Clinical-to-clinical
- Student-to-community partner
- Faculty-to-faculty
- Other:

Course or Clinical Credit:

- Course credit
- Clinical credit
- Extra-curricular
- None
- Other

Course Preparation:

- Existing course
- New course
- NA

Number of Students/Faculty Participating in Exchange:

- Students:
- Faculty:

Questions:

Please contact Michelle Ensminger, Director, Office of Global Health at michelle.ensminger@ttuhsc.edu.

Review & Approval

Review: Office of Global Health

Director, TTUHSC Office of Global Health: _____

Printed Name: _____

Date: _____

Review: School Global Health Steering Committee

Director/Chair, School Global Health Steering Committee:

Printed Name: _____

Date: _____

Approval: Program Director or Chair

Program Director or Chair: _____

Printed Name: _____

Date: _____

Approval: Dean

Dean: _____

Printed Name: _____

Date: _____