



State University of New York  
College of Environmental Science and Forestry

### Short-Term International Academic Program Approval Renewal Form

Please submit a completed Program Fee Worksheet along with this Approval Renewal Form to the Office of International Education after obtaining the signatures of your Department Chairperson. OIE will be responsible in acquiring the final signatures. Please type information directly into the form.

**Important:** If this course is for a Summer Session, please submit this form first before completing a course proposal form with ESF Open Academy.

**Program:** \_\_\_\_\_  
Course Number and Title

**Program Leader(s):** \_\_\_\_\_

**Program Type:**  Summer  Winter  Semester Component  
 Other: \_\_\_\_\_  
Please describe.

**Enrollment Term:**  Fall  Spring  Summer

**Travel Dates:** \_\_\_\_\_ to \_\_\_\_\_  
Depart the U.S. Re-Enter the U.S.

**Program Location(s):** \_\_\_\_\_  
City, Country City, Country City, Country  
\_\_\_\_\_  
City, Country City, Country City, Country

**Does Travel Require a Visa?**  No  Yes  
Please access <https://travel.state.gov/content/passports/en/country.html> to determine if an entry visa is required.

**Which level Travel Advisory has the Department of State issued for your program location(s)?**  
Please review the travel advisories on the U.S. Department of State website to determine if there are conditions that pose imminent risks to the security of travelers traveling to your program location(s).

Travel Advisories: <https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories.html>

There is a Travel Advisory of:  Level 1  Level 2  
 Level 3  Level 4  
for the program location(s) of \_\_\_\_\_.

It indicates: \_\_\_\_\_

**Has the Center for Disease Control issued any immunization recommendations, requirements, or alerts for your program location(s)?**

Please access the Center for Disease Control's website <http://www.cdc.gov/travel/destinationList.aspx> to obtain health and immunization information for your program location(s).

No  
 Yes—Required:  
Recommended:  
Alerts:

**Will you provide a group flight?**  No  
 Yes--Indicate who will accompany students:

**Please attach:**

- Copy of Prior Year's Academic Program Proposal
- Copy of Updated Emergency Action Plan
- Copy of Updated Technology & Communication Plan

**Please note any other changes to the program from previous years:**

**Please note that you will still be required to complete the following after program approval:**

- Participant Information Spreadsheet
- Program Arrangements and Detailed Itinerary Form
- Faculty Led-Program Required Training

**Approval Notes:**

**The above noted proposed international course and budget has been approved for \_\_\_\_\_**  
Travel Semester & Year

Department Chairperson: \_\_\_\_\_  
Print Name Signature Date

**Please submit this form to OIE, 13 Bray Hall to review before final signatures.**

Associate Provost for Instruction: \_\_\_\_\_  
Print Name Signature Date

Provost & Vice President of Academic Affairs: \_\_\_\_\_  
Print Name Signature Date

**Please return all forms to Office of International Education, 13 Bray Hall.**