



Dalton State College Study Abroad Program Approval Form

New Program: Submit with Study Abroad Program Proposal

Existing Program: Attach Projected Budget

Program Title: _____

Countries and Cities Included in Program: _____

Program Director: _____ Telephone: _____ Email: _____

Dates of Program: _____ Term: Fall Spring Summer

Sponsoring College and Department: _____

Office Responsible for Budget: _____

Required Signatures:

_____ Program Director	_____ Date
_____ Budget Manager	_____ Date
_____ School Dean	_____ Date
_____ Director of Center for International Education	_____ Date
_____ Vice President for Academic Affairs	_____ Date
_____ Public Safety	_____ Date
_____ Vice President for Fiscal Affairs	
_____ President	