

MOU SUPPLEMENT MODEL
FOR A DUAL DEGREE PROGRAM

MEMORANDUM OF UNDERSTANDING
SUPPLEMENT
DEPARTMENT OR COLLEGE
FOREIGN INSTITUTION
City, State/Province
Country

And
DEPARTMENT OR COLLEGE
Drexel University
Philadelphia, PA
United States of America

This agreement is a Supplement to the Memorandum of Understanding between Name of Foreign Institution and Drexel University and applies only to the departments of _____ and the College of _____.

This Supplement will become effective upon the signing and will expire on the expiration date of the Memorandum of Understanding.

Whereas the above named institutions are joined in an agreement of mutual cooperation, and the above named departments recognize that an agreement of cooperation would be of mutual benefit and would serve as a continued interest in developing a dual degree program, it is understood that:

- Each college will identify faculty who will participate in teaching and research related to this degree program.
- Each department agrees to collaborate in research in the area of _____ in accordance with the attached information on intellectual property rights and sponsored projects;
- Each department will participate in the enrollment of qualified undergraduate and graduate students in the area of _____.
- Each student involved in this/these programs will be subject to the admission requirements and tuition and fees of the host university. In accordance with these requirements, language competency should

The dual degree program will be executed as described in the addendum to this supplement.

Any expenses incurred by each college/school under this agreement will be the sole responsibility of that college/school.

Drexel designates Person or Title_____

the Foreign Institution designates Person and/or Title_____ as its contact.

Each college/school agrees to comply with the host country's immigration guidelines related to students and/or faculty participants.

(Name) Department Head(Department)
Drexel University_____ Date _____

(Name)
(Department)
(Foreign Institution)_____ Date _____

(Name) Dean
(College) Drexel University_____ Date _____

(Name) Dean of College
(Foreign Institution)_____ Date _____ ((Foreign
College/Division)_____ Date _____

(Name) Provost, Drexel University_____ Date _____
(Name) Title
Foreign Institution_____ Date _____