



## Non-Credit Experience Abroad (NCEA) Approval Form

Email this form along with supporting documents to Drexel Global.

This program is a: ☐ Proposal ☐ Renewal

### PROGRAM INFORMATION

Program Title

Provide a program description:

Program Location(s) Country

City

Start date (**Arrival** Onsite)

End date (**Departure**)

Sponsoring College/School

Sponsoring Department

Prerequisite course of study/memberships (if applicable)

Minimum # students:

Maximum # students:

Participants will be:

☐ Undergraduates ☐ Graduates

Will there be first year students on this program?

☐ Yes ☐ No

NCEA Frequency: ☐ Yearly ☐ Every other year ☐ Other (explain):

I have discussed this NCEA with Global Safety and OPS.

☐ Yes ☐ No

Which are the department and/or instructor's primary motivations for offering an NCEA?

- ☐ Increasing access to global engagement for students
- ☐ Student recruitment tool (adding uniqueness to degree program)
- ☐ Enhancing academics via experiential learning opportunities
- ☐ Student retention tool

- ☐ Faculty international research collaborations and/or professional development
- ☐ Accessibility for a wide range of students
- ☐ Other:

## PROGRAM DIRECTOR (PD) AND CHAPERONE INFORMATION

Except for individual Non-Credit Experiences Abroad, programs are required to be developed and run with logistical/on the ground assistance from a vetted and contracted program provider, partner university, etc. and at least one of the following:

- |   |  |
|---|--|
| <input type="checkbox"/> One Drexel PD/One Drexel Chaperone | <input type="checkbox"/> A Drexel PD and a Drexel Graduate Assistant |
| <input type="checkbox"/> Individual NCEA                    | <input type="checkbox"/> One Drexel PD (provide details):            |
| <input type="checkbox"/> Other (provide details):           |  |

### PROGRAM DIRECTOR (PD)

PD Name

Title

Employee ID

Office Phone Number

Email Address

Cell Number While Abroad\*

Emergency Contact Name

Emergency Contact Email

Emergency Contact Phone Number

### SECOND CHAPERONE/GRADUATE ASSISTANT INFORMATION

Select one: ☐ Chaperone ☐ Graduate Assistant

Name

Title

Employee ID

Office Phone Number

Email Address

Cell Number While Abroad\*

Emergency Contact Name

Emergency Contact Email

Emergency Contact Phone Number

### ADDITIONAL CHAPERONE/TEACHING ASSISTANT INFORMATION (if applicable)

Select one: ☐ Chaperone ☐ Graduate Assistant

Name

Title

Employee ID

Office Phone Number

Email Address

Cell Number While Abroad\*

Emergency Contact Name

Emergency Contact Email

Emergency Contact Phone Number

\*NOTE: all program directors, chaperones, graduate assistants and individual NCEA participants must have a fully functional cell phone with an international plan for the duration of the program.

## LOGISTICS AND PROGRAM PLANNING

Program Directors are required to arrange on-site logistics as outlined in the program itinerary through a local university, partner, or agency for all NCEAs.

This NCEA will be working with:

- ☐ Local University: \_\_\_\_\_
- ☐ Third party agency/provider: \_\_\_\_\_
- ☐ Other: Please explain: \_\_\_\_\_

### LOCAL UNIVERSITY, PARTNER, OR AGENCY CONTACT INFORMATION

Contact Name

Title

Phone Number

Address

Email Address

24/7 Emergency Number

Local university, partner, or agency assisting with the following:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Housing                    | <input type="checkbox"/> Buses, trains, other private transportation | <input type="checkbox"/> Flights (not recommended) |
| <input type="checkbox"/> Tours, entrance fees, etc. | <input type="checkbox"/> Meals                                       | <input type="checkbox"/> Other:                    |
| <input type="checkbox"/> Emergency support          | <input type="checkbox"/> NCEA content                                |  |

Describe relationship with local university, partner, or agency (ex. established partner, new relationship, used on former program)

Describe all **in-country transportation** specifying any transport arranged by third-party agency. Explain how you will mitigate any known transportation risks on-site. Confirm that all vehicles are licensed and insured upon making reservations.

List **housing arrangements and address** and how this lodging was reviewed and selected. If exact lodging is to be determined, address must be provided once arrangements are confirmed. Please note that Airbnb housing will not be approved except for exigent circumstances.

Describe **in-country communication plan** for students and how they will communicate if internet/Wi-Fi becomes unavailable. Faculty are advised to implement a buddy system and group chat (Whatsapp, Google Hangout) during free time.

NCEAs require a pre-departure orientation. Will PD need assistance facilitating the orientation? ☐ Yes ☐ No

*NOTE: students are required to complete an NCEA health & safety module through their study abroad portal.*

On-site orientation upon arrival will be provided by: \_\_\_\_\_

## HEALTH AND SAFETY PLANNING

All new NCEA PD's, Chaperones and Graduate Assistants are required to attend Program Leader training with the Senior Director of Global Safety and Operations.

**US Embassy** address and 24/7 phone number (advise non-US citizen students to have their Embassy information)

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**Hospital / healthcare facility** nearest to housing including address and 24/7 phone number

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**Police department** nearest to housing including address and 24/7 phone number

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Describe any recommended **vaccinations** and/or current **health risks** for the destination country/ies per the country-specific information on the [CDC website](#) as well as precautions students should take to mitigate risks.

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US State Department **Advisory Level** for Destination: \_\_\_\_\_ per the [State Department Travel Advisory](#)

Describe **other known risks** (natural disaster, personal safety issues, political unrest, terrorism) per the [State Department Travel Advisory](#) as well as your preparations for navigating these risks in country.

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Describe any **cultural or logistical considerations related to identity** (race/ethnicity, gender, sexual orientation, religion, disability) that may impact students' on-site experience.

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Identify 2-3 **Shelter in Place** locations where students will be instructed to gather in case of emergency. Proper locations include movie theatres, shopping malls, subway stations, large public buildings, train stations, etc. in addition to program housing or classroom location.

|    |  |
|----|--|
| 1. |  |
| 2. |  |
| 3. |  |

Do any anticipated program activities involve **alcohol**? If yes, please explain. Please read the [Drexel Global Alcohol and Drug Policy](#).

Detail activities that **may involve risk**, (bicycle riding, boating, hiking, etc.) and the rationale for including these activities.

Will there be an in-country **language barrier**? If yes, how will students manage communication with locals?

Describe instructor(s) **previous experience** in country and any additional international travel experience.

Describe instructor(s) **previous experience** leading group travel programs.

Describe chaperone's **previous experience** in country and any additional international travel experience.

Describe chaperone's **previous experience** leading group travel programs.

## IN-COUNTRY CONTINGENCY PLANS

Describe protocols that you will follow if a student or program leader displays symptoms of illness (including COVID-19), bodily injury, etc. and/or needs to remain in-country after the program end date.

Students remaining in-country for illness must be accompanied by program leader until cleared for travel or other arrangements are put into place. List the designated program leader to remain in-country.

Describe how NCEA itinerary will be completed in an extreme circumstance, should PD be rendered incapable of carrying out their obligations.

## ACKNOWLEDGEMENTS AND APPROVALS

### Program Director Role and Responsibilities Acknowledgement

- I have thoroughly vetted and reviewed all program details listed above.
- I am aware that any expenses related to my program must be covered by my Department/College.
- I will follow best practices for experiential global learning and NCEA program delivery, per Drexel Global guidance.
- I understand that I should visit the [Drexel Global](#) HSS website to access important health, safety, and security focused travel resources.
- I have read and understand the [Drexel Global Alcohol and Drug Policy](#).
- I understand that depending on the program location and itinerary, some details may need to be revised due to health and safety factors, as determined by the Senior Director of Global Safety and Operations.

\_\_\_\_\_  
Program Director (PD) Signature

\_\_\_\_\_  
Date:

### Chaperone/Graduate Assistant

- I understand that in case of emergency, I may be expected to take over the responsibilities of the NCEA Program Director, including carrying out program itinerary, providing student support, communicating with Drexel Global as needed.
- Should I need to take over as Program Director, I assume the responsibility of adhering to the program budget.
- I will follow best practices for experiential global learning and NCEA program delivery, per Drexel Global guidance.

\_\_\_\_\_  
Chaperone and/or Graduate Assistant (if applicable)

\_\_\_\_\_  
Date

By signing below, I confirm that I have thoroughly reviewed this document in entirety and hereby approve program implementation as outlined including academics, finances, logistics, and other details.

#### Department Chair Approval

Name  
\_\_\_\_\_

Signature  
\_\_\_\_\_

Date  
\_\_\_\_\_

#### Dean Approval (new proposals only)

Name  
\_\_\_\_\_

Signature  
\_\_\_\_\_

Date  
\_\_\_\_\_

### Vice Provost, Global Engagement Approval

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Senior Director, Global Safety and Operations Approval

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Comments / Conditions: