

GLOBAL ENGAGEMENT
OFFICE OF UNDERGRADUATE STUDIES
MSC 163 · 700 UNIVERSITY BLVD.
KINGSVILLE, TEXAS 78363-8202

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Justification Statement for International Agreements

The Justification Statement for International Agreements is an internal document that provides university administration with a detailed overview regarding the purpose and benefits for a proposed international partnership prior to establishing the appropriate international agreement.

Justification Statements are required to be completed by the university employee proposing the international partnership agreement only after they have submitted the International Collaborations Request Form with Research Compliance and have received their approval to initiate their collaborative efforts.

I. REQUESTOR INFORMATION)N	
i. REQUESTOR INFORMATIO	711	
Requestor's Name:	TAMUK Email:	
Department/College:	Type of Agreement Requesting:	
II. FOREIGN PARTNER BACK	GROUND INFORMATION	
Foreign Partner Institution:	Location:	
	Title:	
Email:	Website:	
Briefly describe the current institutional relationship and time-lined history with the proposed foreign partner:		
Foreign Partner's accrediting agency and/or rankings:		
Briefly explain the contributions provided by the foreign partner (expertise, research sites, labs, etc.) that would be beneficial to Texas A&M University-Kingsville:		
Please list any other notable or world ranked partnerships that this foreign partner may have:		

III. INTERNATIONAL AGREEMENT INFORMATION

Please select all of the applicable areas of cooperation with the potential foreign partner to be associated with this agreement:
RESEARCH
Please provide a brief overview of the research to be conducted:
Is there currently or will there be any grants, fellowships, or other funding for this research that will be associated with the partnership?
Yes No
If yes, please explain:
STUDENT PROGRAMS:
What type of student programming is to be established with this partnership:
Reciprocal Educational Exchange Program (REEP)
Education Abroad Program:
 Faculty-Led Study Abroad Non-Academic Cultural Exchange Virtual (COIL: Collaborative Online International Learning)
Dual Degree Program
Other:
Select the appropriate student demographic the program(s) would service:
Undergraduate Specific major and/or college:
Graduate Specific major and/or college:
Professional Specific major and/or college:

Please list any language, admissions, or other relevant student requirements on behalf of the potential foreign partner TAMUK students will need to meet to participate in the program:

FACULTY ENGAGEMENT:
What type of engagement will TAMUK faculty perform in association with this agreement:
Virtual
Symposium
Visiting Scholar
Faculty Exchange
Other:
IV. PROGRAM/PARTNERSHIP OVERVIEW
Provide a brief description of the program and partnership associated with this agreement:
Please list the long and short-term partnership goals to be established for this agreement:
If requesting a renewal/extension for a general MOA, please provide information regarding the current progress made under the original agreement and any changes that will be made with this new agreement:
If requesting a renewal/extension for a REEP agreement, please provide the student data on the number of students that have participated in the exchange program from both institutions and any modifications that will be made with this new agreement to ensure the program's success:

V. ACKNOWLEDGEMENT & APPROVAL SIGNATURES

REQUESTOR

an international partnership agreement on behalf of Texa follow the established policies and procedures should the	• •
Requestor's Signature:	Date:
DIRECT SUPERVISOR	
By signing below, I confirm the information provided or and is endorsed by the department/unit to request final a agreement with the listed foreign partner.	
Printed Name of Direct Supervisor:	
Direct Supervisor's Signature:	Date:
DEAN/DIVISION HEAD	
By signing below, I confirm the information provided or and is endorsed by the college/division to request final a agreement with the listed foreign partner.	
Printed Name of Dean/Division Head:	
Dean/Division Head Signature:	Date:
PROVOST	
By signing below, I confirm the information provided or and approve the request for the establishment of an inter partner on behalf of Texas A&M University-Kingsville.	national agreement with the listed foreign
Printed Name of Provost:	

Provost's Signature: _______ Date: _____

By signing below, I acknowledge my understanding of the expectations and responsibilities of initiating