**International Accelerated Degree Program Agreement**

*Between*

**The Arizona Board of Regents for and on behalf of**

**Arizona State University (“ASU”)**

*And*

**University Name (XXX)**

**Program format:** 1+1

**Schools represented and degrees offered through this Program Agreement:**

|  |  |
| --- | --- |
| **XXX** | **ASU** |
| Name of College/School | Name of College/School |
| Master of …….. | Master of …….. |
| Master of …….. | Master of …….. |
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This International Accelerated Degree Program (IADP) Agreement (“Program Agreement”) is made between Name of Partner University (“XXX”), (Country), and the Arizona Board of Regents (“ABOR”) for and on behalf of Arizona State University (“ASU”), USA and is subject to the terms of the General Collaboration Agreement between the parties (the “General Agreement”) which are incorporated herein by reference and shall prevail in the event of a conflict with the terms of this Program Agreement. The parties agree as follows:

1. **Agreement and variation**
   1. XXX and ASU agree to establish a collaborative education program known as the “XXX-ASU International Accelerated Degree Program” (the “Program”) under which qualified graduate students enrolled at XXX who have successfully completed the first year of their Master’s degree curriculum may apply for admission to study at ASU (subject to all applicable ABOR and ASU admission policies, procedures and standards) for the next year to complete a one-year specialized Master’s program resulting in the award of a Master’s degree by XXX and a Master’s degree by ASU.
   2. The parties will conduct the Program in accordance with the terms and conditions set forth in this Program Agreement.
   3. No agreement or understanding amending or varying the terms of this Program Agreement shall be legally binding on either party unless made in writing and signed by both parties.
2. **The Program**
   1. The academic component of the Program will be implemented and administered in two phases. During Phase I, XXX will identify and encourage qualified students to become candidates for the Program. These students will study at XXX and complete the first year of their Master’s program. XXX will notify its students who have achieved the requisite level of performance to qualify for the Program at ASU, and recommend that they apply for the Program pursuant to the application instructions for the appropriate IADP format provided online at https://graduate.asu.edu/iadp. ASU will evaluate these students’ applications and determine their admissibility. The students admitted by ASU will enter Phase II of the Program and continue their studies at ASU for the next year according to the approved curricular Plan of Study (POS). Following completion of the requirements for each degree, a successful student will receive two separate Master’s Degrees: one from XXX, and one from ASU.
   2. The following schools, colleges and academic units shall participate in the Program (each, a “Participating Unit” and together, the “Participating Units”), and offer the following degree programs under this Program Agreement:
      1. For ASU: name of school/college: degree programs offered
      2. For XXX: name of school/college: degree programs offered
   3. Each Participating Unit will require a Curricular Plan of Study (POS) approved by both XXX and ASU, which sets forth the required and elective courses necessary to satisfy the requirements for the Master’s Degree at XXX and the Master’s Degree at ASU. The Curricular Plan of Study will detail each Participating Units’ course sequences to guide students’ progression through the Program. Each party may amend its respective Curricular Plan of Study as it deems necessary or appropriate, subject to the reasonable approval of the other party as described in Section 1.3 above.
   4. Below is a description of each phase of the Program and requirements for students participating in the Program.

***Phase I***

* + 1. During their first year of study at XXX, students will complete courses required by their own disciplines as well as any extra English language training needed to achieve the language proficiency requirement for admission to ASU.

***Qualifying for Phase II***

* + 1. XXX will forward an official copy of the student’s transcript to ASU Graduate Admission Services. [add any specific dates or instructions that you want to include here]
    2. At the end of Phase I, ASU will perform an assessment of all the applicants at XXX who wish to proceed to Phase II. ASU will assess and determine each applicant’s qualification for admission in the same manner as for other international students who apply to ASU, in accordance with ASU admission procedures and standards, and will admit students solely at its discretion.
    3. Students must complete Phase 1 with a cumulative GPA of 3.0 on a scale of 4 points in order to be admitted to ASU for Phase II of the Program.
    4. English language proficiency for ASU admission must be at least TOEFL 90 or IELTS 7.0 in order to be admitted to ASU for Phase II of the Program.
    5. XXX Students who are admitted to study at ASU will receive an official admission letter to assist their application for an F-1 visa. Students are responsible for applying for the student visa and addressing all immigration matters with the appropriate authorities.
    6. Once the F-1 visa is issued and all ASU enrollment requirements are satisfied, students will be permitted to enroll in ASU.
    7. Students who fail the ASU assessment or who are unable to obtain an F-1 visa to the USA will not be eligible to continue in the Program.

***Phase II***

* + 1. Students in Phase II will be admitted into one of the following: Name of ASU Academic Unit: Names of Master’s Degree Programs
    2. Students in Phase II will be afforded all of the usual privileges of ASU’s full time international students in accordance with all applicable laws and regulations.

* + 1. ASU will review and consider transfers of up to 12 credit hours of appropriate graduate coursework taken at XXX to ASU. Such transfers are at the sole discretion of Name of ASU Academic Unit.
  1. Tuition and Fees
     1. Student tuition and fees for Phase I studies will be established and collected by XXX and ASU shall have no claim against those fees.
     2. Student tuition and fees for Phase II studies will be established and collected by ASU and XXX shall have no claim against those fees. XXX waives any and all rights to any commission on student tuition and fees paid to ASU.
     3. Students in Phase II are liable for all costs to study at ASU. The cost shall include all travel, room and board, insurance coverage, and all tuition and prescribed fees to be collected by ASU. The base tuition and fees for Phase II are those published by ASU for international students. Tuition and fees may be adjusted at the sole discretion of ASU.

1. **Privacy and Educational Records** 
   1. Student educational records are protected by the U.S. Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g (FERPA). The parties will not require any ASU students or employees to waive any privacy rights (including under FERPA or the European Union’s General Data Protection Regulation (GDPR)) as a condition for receipt of any educational services, and any attempt to do so will be void. The parties will comply with FERPA and will not access or make any disclosures of student educational records to third parties without prior notice to and consent from ASU or as otherwise provided by law. For purposes of this Program Agreement only, ASU designates administrators of this Program Agreement at XXX as a “school official” for ASU under FERPA, as that term is used in FERPA and its implementing regulations. In addition, any access or disclosures of student educational records made by administrators of this Program Agreement at XXX must comply with ASU’s definition of legitimate educational purpose in SSM 107-01: Release of Student Information. If an administrator violates the terms of this section, they will immediately provide notice of the violation to ASU.
2. **Contacts**
   1. For the implementation and care of this Agreement, ASU appoints Dean of the Graduate College, Alfredo Artiles, and XXX appoints Title, Name. Notices shall be sent to the following people at the following addresses:

**For ASU:**

Alfredo Artiles

Dean of Graduate College

Arizona State University

P.O. Box 871003

Tempe, AZ 85287-1003

USA

Telephone: (480) 965-7279

Fax: (480) 727-0881

Email: alfredo.artiles@asu.edu; brianHsmith@asu.edu

**For XXX:**

Name

Title

Name of Partner University

Address of Partner University

Country

Telephone: (country code) xxxx-xxxx

Fax: (country code) xxxx-xxx

Email:

All notices, requests, reports and other communications required or permitted to be given under this Agreement shall be deemed to have been duly given if the same shall be in writing and shall be delivered either (i) personally, (ii) by facsimile transmission, with a copy by regular mail, (iii) by registered or certified mail, postage prepaid, return receipt requested or (iv) by courier to the address written above or to such other address or facsimile number as may be specified from time to time in a written notice given by a party in accordance with this paragraph. The parties agree to acknowledge in writing the receipt of any written notice, request, report or other communication under this paragraph that is delivered in person.

1. **Term and Termination**
   1. This Program Agreement shall commence on the effective date indicated below and will continue for three (3) years.
   2. Without prejudice to any other remedy for breach of this Program Agreement, upon termination of this Program Agreement no party will be released from any obligations which have accrued prior to the effective date of such termination.
   3. In the third year of this Program Agreement, the parties will determine whether to extend the Program Agreement for another term.

This Program Agreement is signed in duplicate by the legal representative(s) of the parties and shall take effect on the date of signing of the final signatory, which shall be ASU’s Deputy Provost and Vice President for Academic Affairs.

**Signatures are on the next page.**

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| --- | --- |
| **The Arizona Board of Regents**  *for and on behalf of*  **Arizona State University**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Stefanie Lindquist**  *Deputy Provost and Vice President for*  *Academic Affairs*  *Arizona State University*  *Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*    *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  **Alfredo J. Artiles**  *Dean, Graduate College*  *Arizona State University*  *Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*    *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  **Name of Academic Unit Dean**  *Dean, Name of Academic Unit*  *Arizona State University*    *Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | **Name of Partner University**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Name**  *Title*  *Name of Partner University*    *Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Name**  *Title*  *Name of Partner University*    *Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Name**  *Title*  *Name of Partner University*    *Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* |

Sample Plan of study (POS) template

(Request the most current templates for your partner programs: [ASUGlobal@asu.edu](mailto:ASUGlobal@asu.edu))

**Plan of Study (POS) Notes to ASU staff and faculty (delete before printing):**

* You may choose a template format from the samples below or use any format that works better for your POS.
* Partner Academic Units may **provide curriculum details for the first year of study, translated to English**, either by entering them into a template like one of the samples below, or attaching them in a different format. (Blue type = ASU Academic Unit / Red type = Partner Academic Unit)
* Up to 12 graduate credits taken at the partner university may apply to the ASU graduate program as long as the partner master’s degree is not issued until after the student completes their studies at ASU. ASU cannot use credits from a degree already-conferred.
* Include course numbers so the Graduate Program Services team at Graduate College can verify the correct courses when reviewing/approving.
* Include any specific notes that will be useful to future advisors of these students.
* **Approval of this POS requires that your courses correspond to accurate information in the ASU Course Catalog.** If you discover a need for updates in the Course Catalog, contact Graduate Program Services at [grad-gps@asu.edu](mailto:grad-gps@asu.edu).

**EXHIBIT A**

***SAMPLE #1 OF POS FORMAT***

|  |  |  |  |
| --- | --- | --- | --- |
| **Curriculum of Plan of Study (POS)**  **For an International Accelerated Degree Program (IADP)** | | | **1 + 1 Degree**  **IADP Format** |
| **NAME OF PARTNER INSTITUTION**  **Name of Academic Unit/Department**  Master of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **ARIZONA STATE UNIVERSITY (ASU)**  **Name of Academic Unit/Department**  Master of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **SU Graduate/Matriculated Courses:** | | **ASU Graduate/Matriculated Courses:** | |
| **Year 1** | | **Year 2** | **YEAR 3** |
| **Semester 1** | **Semester 2** | **Term 1 & 2** | **Term 3** |
| * Courses * Courses * Courses \*   \* -- OR --  See the attached education plan from (**XXX**), (**Academic Unit**) for (**Major**) Master’s major. | * Courses * Courses * Courses \* | **TERM 1 (Fall)**   * Courses * Courses * Courses \*   **TERM 2 (Spring)**   * Courses * Courses * Courses \*   **A maximum of 12 shared credits from electives taken at XXX.** | **TERM 1 (Fall)**   * Courses * Courses * Courses \* |
| Total Credits: | Total Credits: | Total Credits: | Total Credits: 9 |
| ***Notes:***   * *500 level courses will be used towards ASU's graduate program.* * *Course selection depends on choice of thesis or non-thesis option.* | | | |

**EXHIBIT B**

***SAMPLE #2 OF POS FORMAT***

|  |  |  |
| --- | --- | --- |
| **Curriculum of Plan of Study (POS)**  **For an International Accelerated Degree Program (IADP)** | | **1 + 1**  **IADP Format** |
| ***Brief Summary of the Plan:*** | | |
| **NAME PARTNER UNIVERSITY (XXX)**  **NAME OF COLLEGE/SCHOOL**  Bachelor of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **ARIZONA STATE UNIVERSITY (ASU)**  **School Name (acronym)**  Master of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Plan code of major: | |
| **Year 1** | **Year 1** | |
| Graduate | Graduate (Matriculated) | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Detailed Plan of Study (POS)*** | | | | |
| **NAME PARTNER UNIVERSITY (XXX)** | | | | Notes for advisors, pre-requirements, descriptions… |
| **Year 1 – graduate** | | | |  |
| **Fall Semester 1** | Crdt | **Spring Semester 2** | Crdt |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| **Total Credits:** |  | **Total Credits:** |  |
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| **ARIZONA STATE UNIVERSITY (ASU)** | | | | Notes for advisors, pre-requirements, descriptions… |
| **Year 1 – graduate** | | | | * 400 level completed at ASU must be approved by the partner university since students will be receiving their bachelor degree from their home institution. * 500 level courses will be used towards ASU's graduate programs. |
| **Fall Semester 7** | Crdt | **Spring Semester 8** | Crdt |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
| (Course #) Course name |  | (Course #) Course name |  |
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| (Course #) Course name |  | (Course #) Course name |  |
| **Total Credits:** |  | **Total Credits:** |  |
|  |  |  |  |
|  |  | **TOTAL PROGRAM CREDITS:** |  |
|  |  |  |  |