McMaster University International Agreement Proposal Form

If you are a McMaster employee proposing an agree	eement, please fill out this section
Faculty/Staff Name (internal agreement initiator):	
Department/Faculty:	
Email:	
Chair/Dean Approval acquired? Y N	Details:
Proposed Partner Information:	
Please provide the name of the proposed partner ins	titution or organization you represent:
Type of Institution/Organization:	
Primary Contact Name (external agreement initiator)):
Position/Title:	Office:
Phone:	Email:
Address:	Country:
Organization website:	
Additional Contact Name:	
Additional Contact Position/Title:	
Additional Contact Office/Organization:	
Additional Contact Email:	
Multi-institution partnership? Y N	
Proposed Agreement Information:	
Renewal of previous partnership/agreement?	Y N
Partnership Objective (i.e., agreement type sought,	check any that apply)
Establish student exchange	Establish student mobility
Establish faculty/staff mobility	Establish research partnership
Establish student recruitment agreement	Establish consulting/advisory agreement
Establish MOU or Framework Agreement to f	further explore collaboration
Other:	

Brief Description of proposed activities
Benefits of proposal for each partner
Proposed partner Experience in international partnerships, collaboration, etc,
Other relevant information (e.g., existing research connections, rankings, etc.)
Attachments

Note: form must be downloaded to submit