## REQUEST FOR RENEWAL OF MEMORANDUM OF UNDERSTANDING

Ind	lividual requesting renewal of agree	nent:	
Title	e and Department/College:		
Email Address:		Phone:	
Naı	me of DEO/Collegiate Dean:		
Ple	ease answer the following question	ns in order to expedite the review of the proposed agreement:	
1.	International Partner Institution Information:		
	Name:		
	Country:		
	Website:		
	Position Title:		
	Email:		
	specific goals accomplished, etc	):	
3.	What activities are planned for the your department/college?	e partnership within the next year and how will it benefit the UI a	

	No
	Yes – Please detail these commitments in the space provided below.

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