ROUTING YOUR DEPARTMENTAL STUDY ABROAD PROGRAM RATE REQUEST FORM

NOTE: If you are new to DocuSign, you can utilize the Quick Reference Cards posted here: https://spa2013.itap.purdue.edu/itea/docusign/Pages/DocuSign%20Support.aspx

At this time we recommend you fill out the rate request form in its Excel format and only upload it when it is ready for routing for signatures. Please note: rate request forms for multiple programs should NOT be submitted all together in one file – they should each be contained in their own file and sent for signatures separately. Please use this file naming convention: RR-COLLEGE-PROGRAM LEADER LAST NAME-TERM-COUNTRY

- 1) Log in to DocuSign https://one.purdue.edu/task/all/docusign
- 2) After logging in, click on the "START" button in the middle of the landing page.

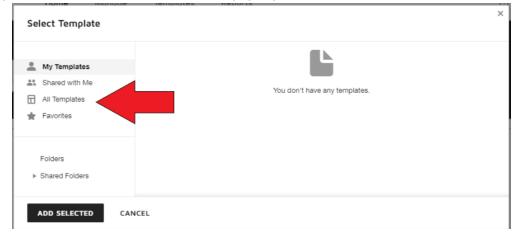


3) Click on the "Use a Template" option in the drop-down menu.



Drop documents here to get started

4) Click on "All Templates" on the left side of the box that pops up in the middle of the screen.



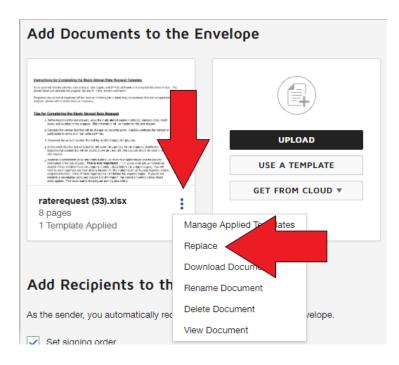
5) In the search bar type in "Study Abroad Rate Request" and hit enter. Click the radio button next to the name of the template you need and then click on the black "ADD SELECTED" button in the bottom left corner of the box.

My Templates	Q Study Abroad Rate Request		×
Shared with Me	Name	Owner	Last Change 🔻
All Templates	HHS_Study Abroad Rate Request	Paula Memmer	9/28/2021 05:10:14 pm
Folders	VETMed_Study Abroad Rate Request	Paula Memmer	9/28/2021 03:29:29 pm
Shared Folders	CLA_Study Abroad Rate Request	Paula Memmer	9/28/2021 03:26:54 pm
	C ENG_Study Abroad Rate Request	Paula Memmer	9/28/2021 03:23:21 pm
	Study Abroad Rate Request	Paula Memmer	9/28/2021 03:13:10 pm

6) The box will change to a new one where you can edit the recipients. Do not make any changes yet – just click on the "ADVANCED EDIT" button in the bottom left area of the box. It does not appear to be a button, but the text will turn blue when you hover over it indicating it is an option you can use.

Study A	Study Abroad Rate Request					5
Recipie	nts					•
1	Business Office Name * Email *	8	🖋 NEEDS TO SIGN ∀	CUSTOMIZE 🔻	Ŧ	
2	Department Head Name * Email *	8	🖉 NEEDS TO SIGN ∀	CUSTOMIZE ¥	Ŧ	
3	Dean or f	8	🖉 NEEDS TO SIGN 🔻	CUSTOMIZE ¥	Ŧ	•
SEND	ADVANCED EDIT DISC	ARD				

7) Click on the three dots (More options) for the document already in the envelope and select replace.



- 8) At this point you will likely get a pop up that says "Change to Applied Template" click the CONTINUE button in the box.
- 9) Upload your completed and saved Rate Request. Please use this file naming convention: RR-COLLEGE-PROGRAM LEADER LAST NAME-TERM-COUNTRY
- 10) After your Rate Request has been uploaded, please enter the routing for signatures for your department. Please note that you can add additional required signatures after Paula Memmer's place in the signature flow, but please do not alter the order of the signatures and CC's populated in the template.

1	Business Manager Name *	Z NEEDS TO SIGN V	CUSTOMIZE 🔻	Î
2	Department Director of Financial Affairs or designated ADFA Name *	🖉 NEEDS TO SIGN 🔻	CUSTOMIZE 🔻	Î
	Study Abroad Program Manager Name * Paula Memmer	✓ NEEDS TO SIGN ∨	CUSTOMIZE ¥	Î
3	Email * pmemmer1@purdue.edu			-
4	Department Head Name * Email *	💆 NEEDS TO SIGN 🔻	CUSTOMIZE ¥	Î

5	Dean or Designee Name * 2 Email *	✓ NEEDS TO SIGN ▼	CUSTOMIZE 🔻
6	Director of Study Abroad Name *	NEEDS TO SIGN V	CUSTOMIZE 🔻 📋
7	Business Manager, Global Partnerships and Programs Name * Meghan G Rusk Email * rusk0@purdue.edu	✓ NEEDS TO SIGN ∨	CUSTOMIZE 🔻 📋
8	Director of Financial Affairs, President/CFO/Partnerships Name * Kristin N Gikas Email * kgikas@purdue.edu	✓ NEEDS TO SIGN ▼	CUSTOMIZE 🔻 👕
9	Executive Director, Business and Finance Operations Name * Kristi L Mickle Email * Kmickle@purdue.edu	✓ NEEDS TO SIGN ▼	CUSTOMIZE 🔻 📋
10	Bursar operations Name * Cheryl Files Email * Cfiles@purdue.edu	CC RECEIVES A COPY V	CUSTOMIZE 🔻
10	Senior Associate Bursar Name * Michelle Fulk Email * mfulk@purdue.edu	CC RECEIVES A COPY V	CUSTOMIZE 🔻 👕
11	Senior Administrative Assistant, Comptroller Name * Shannon Williams Email * skelley@purdue.edu	CC RECEIVES A COPY V	CUSTOMIZE 🔻 👕

NOTE: The "ADD RECIPIENT" button is at the very bottom of the already populated signing list. You can add additional signers or CC recipients there and then drag them to the appropriate place in the signature flow.11) After you've correctly entered the signing order, click on the gold "NEXT" button in the upper right hand corner.

12) Review the signature fields to make sure they are placed correctly in your document. If you have uploaded a rate request document that has the pages in a different order than the template document, these fields will not line up. You can either re-order the pages in your original document and then re-upload it, or you can drag the colored boxes to where they should be located

			Explanation Brief summary of the purpose of the program and the benefit to the students.
PURI	DUE UNIVERSITY I (Department) Busine	nter Office Memorandum ss Office	strer summary of the purpose of the program and the benefit to the suturents.
To: Kristi Miel From: Business M	kle, Executive Tomost for, Finance and Manager	Business Operations	Cancellation Policy Attach a copy of the Cancellation Policy to this rate request outlining deposit/financial obligations for participation in the program.
Date: 10/9/ Re: Request fo Program N	r Non-Traditional Fee Rate Approva	1	Otherwise, please make note here that a cancellation policy is not in place for this program and the department understands they will be unable to collect funds from students if they withdraw.
Department:	Department Name		Secrutly Risk and Assessment Committee (SRAC) Approval
Effective Date:	Study Abroad portion: On campus portion:	Dates of overseas portion Dates, times and location	Is this program traveling to any country with a heightened Travel Advisory? VES or NO What is considered heighted -
Course Offerings SA Course # UG SA Course # UG SA CRN	Category Code Credits "S"or no code # credits	Tide Program Name	Any location that is level 2 - Exercise Increased Caution-Contains Areas with Higher Security Risk (Level 2 with mere - "Increase caution only" does not warrant the need for additional approval.)
IG SA CRN IR SA Course # (if app IR SA CRN	ulienbie - delete if not)	Instructors Professor/staff_Name	If yes, please submit a copy of the approval email from the SRAC committee with this rate request. Approval Recommended:
Item Study Abroad Fee Program Fee Insurance FOTAL	Proposed Rate Text 0.00 #DIV/0! 0.00 #DIV/0!		College Director of Financial Alliairs Date or designated ADI'A Stop Department Head Date
Program fees and insu account to cover instru	ictor expenses and other program co rtfall. A significant projected shortf	Account number: nent Name from the Bursar fee income osts. Department Name will be responsible all due to low student participation may	Sten Date Sten Brian Harley Date Date Director, Study Abroad Director of Financial Affairs, President/CFO/Partnerships
F 2, uni cark			Approved:

13) After verifying the signature and initial fields are where they should be, click the yellow "SEND" button in the upper right hand corner.



14) That's it! You will receive a notification that the document has been completed after all parties have signed off on your rate request form. This notification email will include a link to your form where it is stored in DocuSign.