AMERICAN OVERSEAS RESEARCH CENTERS (AORC)

CFDA NUMBER: 84.274A

IFLE REPORTING SYSTEM PROPOSED SCREENS

Program: AORC	**Grant Start Date:**	**Current Report Information**
Institution:	**Grant End Date:**	**Start Date:**
Project:	**Final Report Due Date:**	**End Date:**
Award #:	**Amount:**	**Due Date:**
Project Director:		**Submit Date:**
World Area:		**Amount:**

Administrative				Reports		
Project Info	Add User	Travel Requests	Select, View, Submit Reports	Narratives	Budget	Report Data

Project Information

Review and edit the project information and contact information for the project director. If you need to change the name or email of your project director, contact your program officer for instructions. Enter your abstract and select the languages, disciplines, countries, and subject areas relevant to your project.

* Required fields

Name:

Title:

Street: *

Street 2:

City: *

State: District of Columbia

Postal code: *

Phone: *

Fax:

Email:

Web site:

Home institution:

Institution Type: Select one

MSI Designation: *   Eligible to receive assistance under sections 316 through 320 of part A of title III, under part B of title III, or under title V of the HEA.

   Not eligible to receive assistance under sections 316 through 320 of part A of title III, under part B of title III, or under Title V of the HEA.

Community College Designation: *   Meets the definition in section 312(f) of the HEA (20 U.S.C. 1058(f)); or, an institution of higher education (as defined in section 101 of the HEA (20 U.S.C. 1001)) that awards degrees and certificates, more than 50 percent of which are not bachelor's degrees (or an equivalent), or master's, professional, or other advanced degrees.

   Does not meet the definition in section 312(f) of the HEA (20 U.S.C. 1058(f) or, is not an institution of higher education (as defined in section 101 of the HEA (20 U.S.C. 1001)) that awards degrees and certificates, more than 50 percent of which are not bachelor's degrees (or an equivalent), or master's, professional, or other advanced degrees.

Project title: *

World area: *   South Asia

Program officer:

▪ Abstract

Insert the abstract for the approved project into the box below.

(Limit 4,000 characters and spaces)

*

Characters and Spaces:

▪ Subject Areas *

Please select no more than 40 Subject Areas most relevant to the project.

Hold down "ctrl" and click to make multiple selections.

  Select all that apply
  Area Studies
  Assessment and Testing
  Collaboration
  Dissemination
  Dissertation Research
  Distance Learning
  Evaluation
  Foreign Language Across the Curriculum
  Foreign Language Programs (Domestic)

IFLE IRIS

Program: AORC **Institution:** **Project:** **Award #:** **Project Director:** **World Area:**	**Grant Start Date:** **Grant End Date:** **Final Report Due Date:** **Amount:**	**Current Report Information** **Start Date:** **End Date:** **Due Date:** **Submit Date:** **Amount:**

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Administrative			Reports			
Project Info	Add User	Travel Requests	Select, View, Submit Reports	Narratives	Budget	Report Data

International Travel Approval Request

Create an international Travel Approval Request (TAR) for each individual. (A TAR is required if grant funds are supporting any cost associated with the travel, e.g., per diem, air fare, ground transportation.)

- Click the "Add a Travel Approval Request" button to create a TAR.
- IRIS will notify your program officer by email when the TAR is submitted.
- Once the TAR is approved or disapproved, IRIS will send you an email with additional information from your program officer.
- Approved TARs can be updated and resubmitted to US/ED for review.

The TAR must be submitted to US/ED at least 30 days prior to the traveler's departure.

Action	Name(s)	Status	Submitted Date	Approval Date	FY Funds	Travel Dates	Country	Purpose

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Project Director:		**Due Date:**
World Area:		**Submit Date:**
		Amount:

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Administrative			Reports			
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International Travel Approval Request
(Submit 30 days in advance of travel)

Complete all required fields for each international traveler participating in project related activities.

* Required fields

Participant name: *

Type of participant: *   Select one

Purpose of travel: *   Select one

Justification: * (limit 2000 characters)

Characters and Spaces:

Discipline / Field: Select

Country(ies): *   Select one

Select one

Select one

Select one

Select one

AORC funds requested: * $

Fiscal year funds to be used: *   2012

(limit 2000 characters)

Detailed itemization of Title VI AORC funds e.g., travel, lodging, and meals and incidental expenses. Please refer to GSA for domestic per diem rates and US Dept. of State for international rates.

Characters and Spaces:

Departure date: *   (mm/dd/yyyy)

Return date: *   (mm/dd/yyyy)

Comments: (limit 1000 characters)

Characters and Spaces:

◼ Participant's Departure Itinerary
Please include connecting flights.

Departure Date (mm/dd/yyyy)	From City	From State or Country	Arrival Date (mm/dd/yyyy)	To City	To State or Country	Airline and Flight Number

◼ Participant's Return Itinerary
Please include connecting flights.

Departure Date (mm/dd/yyyy)	From City	From State or Country	Arrival Date (mm/dd/yyyy)	To City	To State or Country	Airline and Flight Number

* Please select from one of the following:

I certify that this travel request complies with the Fly America Act and/or Open Skies agreement.

Grant funds are being used for overseas costs, excluding international travel.

International and Foreign Language Education
U.S. Department of Education