**Stephen M. Ross School of Business at the University of Michigan  
GLOBAL MBA**

**MAP 2018 Project Proposal**

\*\*\*Completed proposals should be sent to [gmbamap@umich.edu](mailto:gmbamap@umich.edu) by March 1, 2018\*\*\*

**Date:**

**Company/Organization:**

**Part One: Organization Information**

**1. What is the mission or objective of your organization/unit?**

**2. What are the primary activities, products or services your organization provides?**

**3. How long have you been in business?**

**4. How many employees work for your organization?**

**5. What is your company website?**

**6. What is your annual revenue?**

**Part Two: Project Information**

**7. Describe your project. What is the issue or opportunity you would like the team to examine?**

**8. Why is this issue important at this time?**

**9. What project deliverables do you have in mind? The more specific you can be, the better the students will be able to assess their interest and fit. (Examples include: marketing plan, financial impact assessment, situation analysis, competitive landscape assessment, optimized business model, etc.)**

**10. What outcomes do you feel would confirm the project was a success?**

**Part Three: Team Requirements**

**11. Please note any language requirements that are necessary for the success of the project.**

**Language choice 1 (other than English)**

**Desired or Required**

**Skill level (choose one) conversation, fluent or native**

**How many team members should have this capability?**

**Language choice 2 (other than English):**

**Desired or Required**

**Skill level (choose one) conversational, fluent or native**

**How many team members should have this capability?**

**Language choice 3 (other than English):**

**Desired or Required**

**Skill level (choose one) conversational, fluent or native**

**How many team members should have this capability?**

**12. Skills:**

**Is there specific industry knowledge and/or functional expertise necessary for students on this project? Please specify whether these skills are required or preferred.**

**13. Citizenship:**

Global MBA MAP Teams are made up of a diverse group of students, the majority from Asian countries. All international students will have proper documentation allowing them to participate in domestic and international locations. If, however, restrictions exist within your organization, please describe them below.

**A student of any nationality may choose this project.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| |  | | --- | |  | | **Yes** |  |  |
| |  | | --- | |  | | **No** |  |  |

**If no, please provide details:**

Note: Limiting students based on American citizenship could result in cancellation of your project due to lack of staffing.

**14. Confidentiality:**

**Are students required to sign a non-disclosure agreement? NOTE: We may request a copy of the NDA in advance of approving the project, particularly if you are a startup organization.**

|  |  |  |  |
| --- | --- | --- | --- |
| |  | | --- | |  | | **Yes** |  |
| |  | | --- | |  | | **No** |  |

**If students are currently employed by one of your competitors, should they not choose this project?**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Yes, this is an issue** |
| |  | | --- | |  | | **No, not an**  **issue** |

**If yes, list the competitors that fall into this category:**

**Part Four: Travel Requirements**

Logistics and Expectations:

1. The primary goal of MAP is to provide students with the opportunity to test their MBA curriculum knowledge and leadership skills in a real world setting.

2. Sponsors are expected to host the project team onsite for a minimum of one week and up to four weeks. The team time onsite will include their project orientation, data gathering, as well as possible visits to conferences and trade shows, if applicable.

3. Project destination(s) should be determined prior to submitting a project proposal.

4. Teams must return to campus by June 1 unless approved in advance by the faculty.

5. SE Michigan sponsors can expect their MAP team to be onsite intermittently throughout the project.

**15. Travel locations expected; list cities, states and countries:**

**Weeks of travel expected:**

**16. Our organization has budget approval to host a MAP team for a minimum of one week onsite throughout the seven week project period.**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Yes** |
| |  | | --- | |  | | **No** |

**17. If team travel is expected to be less than one week, or more than four weeks, please explain why:**

**18. Please provide a brief description of the travel plans you have in mind at this time. This travel provides the team with 1) a required project orientation and goals session, 2) an opportunity to meet with stakeholders, 3) a cultural immersion experience, and 4) the ability to collect data for their final recommendations.**

**Part Five: Company Support**

**19. What kind of data or other resources can your company provide to help the team succeed?**

**20. Who will work most closely with the students? Please provide name and title.**

**21. To whom will the team most likely present their final recommendations?**

**Part Six: Contacts**

**22. Executive Sponsor (Executive who provides MAP team access to data and people for project success)**

**First Name:**

**Last Name:**

**Business Title:**

**Prefer to be addressed as:**

**Email:**

**Street Address1:**

**Street Address2:**

**City:**

**State:**

**Zip:**

**Country:**

**Business Phone:**

**Cell Phone:**

**U of M Graduate?**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Yes** |
| |  | | --- | |  | | **No** |

**If yes, U of M Degree and Year:**

**23. Project Liaison (Main contact with students)**

**First Name:**

**Last Name:**

**Business Title:**

**Prefer to be addressed as:**

**Division:**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Address same as above** |

**Street Address1:**

**Street Address2:**

**City:**

**State:**

**Zip:**

**Country:**

**Business Phone:**

**Cell Phone:**

**Email:**

**U of M Graduate?**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Yes** |
| |  | | --- | |  | | **No** |

**If yes, U of M Degree and Year:**

**24. Alternate Project Liaison**

**First Name:**

**Last Name:**

**Prefer to be addressed as:**

**Business Title:**

**Division:**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Address same as above** |

**Street Address1:**

**Street Address2:**

**City:**

**State:**

**Zip:**

**Country:**

**Business Phone:**

**Cell Phone:**

**Email:**

**U of M Graduate?**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Yes** |
| |  | | --- | |  | | **No** |

**If yes, U of M Degree and Year:**

**25. If this project takes place in an international location, who will be the local contact?**

**First Name:**

**Last Name:**

**Business Title:**

**Prefer to be addressed as:**

**Street Address1:**

**Street Address2:**

**Country:**

**Business Phone:**

**Cell Phone:**

**Email:**

**U of M Graduate?**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Yes** |
| |  | | --- | |  | | **No** |

**If yes, U of M Degree and Year:**

**Part Seven: MAP Program Info**

**26. How did you find out about the MAP program?**

**27. Have you communicated with anyone at the Ross School of Business regarding this project?**

|  |  |  |
| --- | --- | --- |
| |  | | --- | |  | | **Yes** |
| |  | | --- | |  | | **No** |

**If yes, who?**

**Part Eight: Review of Sponsor Responsibilities**

**28. Please check the boxes below to confirm that you understand the expectations set forth regarding your sponsorship of a MAP team.**

□ I understand if our project is accepted and granted a student team, our organization will provide the team with senior management support and access to data necessary to successfully meet the project objectives.

**□** I understand if our project is accepted and granted a student team, our organization will cover the expenses required and applicable to our project.

**29. Whom should we contact if we have questions about this proposal?**

**Name:**

**Phone number:**

**Email address:**

**QUESTIONS?** If you have any questions about the MAP program or the submission of this proposal, please contact the Global MBA Office at 734-764-6411 or [gmbamap@umich.edu](mailto:gmbamap@umich.edu). Completed proposals may be submitted to gmbamap@umich.edu.