## APPENDIX V

## SABBATICAL LEAVE APPLICATION TITLE PAGE

Name:		Date:
Department:		
Date of Full-Time Employmen	t at the College:	
Date of Previous Sabbatical (If	Any):	
Job Responsibilities:		
Education Degree:	Major	Year:
Degree:	Major	Year:
Degree:	Major	Year:
Are You Requesting a: Fabbatical?	ull Year	/Half Year /Semester
1		to to
The following signatures do appropriate notification to supe	_	mply approval, but are necessary for
Department Head	Dean	
Vice President, Academic Affa	irs	

Total application must be typed and cannot exceed four (4) 8 ½" x 11" pages.

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If you are chosen for a sabbatical leave, you will be required to sign a contract which specifies the required employment period following the return from the leave. Approval of pursuit of a degree or coursework contained within the sabbatical application does not imply approval for the Educational Achievement Incentive Pay.

## SABBATICAL LEAVE APPLICATION

Respond to all statements. Applicant is limited to no more than $\underline{\text{three}}$ typewritten 8 ½" x 11" pages excluding the title page.			
NAMI	E: DATE:		
1.	Describe the purpose and nature of your sabbatical proposal.		
2.	How will your sabbatical leave benefit students, the department, and the College?		
3.	How will the sabbatical upgrade your personal and professional development?		
4.	Other than your primary duties at the college, what have been your contributions to the College and/or the community?		

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