APPENDIX V

SABBATICAL LEAVE APPLICATION
TITLE PAGE

Name: _____ Date: _____

Department:_____

Date of Full-Time Employment 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: Full Year _____ /Half Year _____ /Semester _____
Sabbatical?

Leave Dates Requested: From _____ to _____
Specify Semesters: From _____ to _____

The following signatures do not necessarily imply approval, but are necessary for appropriate notification to supervisors:

_____ _____
Department Head Dean

_____
Vice President, Academic Affairs

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

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 **three** typewritten 8 ½" x 11" pages excluding the title page.

NAME: _____ **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?