

**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.

