



# Sabbatical Request Form

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Date Submitted to Department Chair: \_\_\_\_\_

Dates/Semester of proposed Sabbatical: \_\_\_\_\_

Dates/Semester of most recent previous Sabbatical: \_\_\_\_\_

Title/Topic of Sabbatical Study/Research: \_\_\_\_\_

\_\_\_\_\_

Proposed deliverable of Sabbatical: \_\_\_\_\_

\_\_\_\_\_

How will the faculty member's teaching and advising be covered during the Sabbatical leave? \_\_\_\_\_

\_\_\_\_\_

## Signatures:

Faculty Member: \_\_\_\_\_  
date

Department Chair:  
\_\_\_\_ Approve \_\_\_\_ Disapprove \_\_\_\_\_  
signature date

VPAA:  
\_\_\_\_ Approve \_\_\_\_ Disapprove \_\_\_\_\_  
signature date

President:  
\_\_\_\_ Approve \_\_\_\_ Disapprove \_\_\_\_\_  
signature date

Attach Sabbatical Proposal Outline