

APPLICATION FOR LEAVE



Rev. 7/28/14
Form L

Name _____ Department _____

Leave of Absence (See A.M. #322)

Sabbatical Leave (See A.M. #321)

Service at the College: from _____ month _____ year to _____ month _____ year

Date of Leave: from _____ month _____ year to _____ month _____ year

Aim and Objective of Leave: _____

College/University to be attended: _____

Fellowship or Grant received: _____

I make the above application and attach the outline of my plan of study, research, or activity.

I also accept the following conditions:

1. At the completion of my leave, I will serve the College for one year for each semester of leave granted.
2. In any publication or completed research, I will indicate that it was done on leave granted by the College.
3. On returning to the College, I will submit a written report to the President evidencing the fulfillment of my aim and objectives.
4. I will share my experience with the College faculty.
5. In preparation for my leave, I, together with the Department Chair / ESL Director, have made arrangements for the teaching of courses, in my absence, that would have been assigned to me during the period of my leave.

Signature

Date

The faculty member completes one form to give to the Department Chair/ESL Director. A copy with the decision of and signature of the appropriate officials will be given to the faculty member.

DECISION:

() **Approved**

() **Rejected**

Department Chair / ESL Director

Date

() **Approved**

() **Rejected**

Vice President for Academic Affairs

Date

() **Approved**

() **Rejected**

President

Date

FOR OFFICE USE ONLY

Copies to: () **President**

() **Vice President for Academic Affairs**

() **Chair/Director**

() **Applicant**