

APPLICATION FOR SABBATICAL LEAVE

Applicants for Sabbatical Leaves should consult the current Collective Bargaining Agreement on Sabbatical Leave Policy, and the Sabbatical Leave Guidelines monograph developed by the committee.

Name of Applicant: _____

Academic Rank: _____

Department: _____

Office telephone: _____ Home telephone: _____

Campus Address: _____

Date of Appointment in position: _____

Dates of Proposed Sabbatical Leave: (check only one)

- _____ 1. Fall Semester 2019, Full pay
- _____ 2. Spring Semester 2020, Full pay
- _____ 3. Academic Year, 2019-2020, Half pay
- _____ 4. Summers 2019 and 2020, Full pay
- _____ 5. To be determined

YEARS OF SERVICE IN THE PENNSYLVANIA STATE SYSTEM OF HIGHER EDUCATION AS OF September 1, 2019 _____ or January 2020* _____

*(see page 1, B.6)

SERVICE AT IUP: DATES, YEARS; SERVICE IN OTHER PASSHE: DATES, YEARS

PERMANENT FULL TIME _____

TEMPORARY FULL TIME _____

PART TIME _____

Semester(s) of prior Sabbatical Leave(s) taken Date(s):

Has a sabbatical report been filed? _____ YES _____ NO

If a sabbatical leave report has been filed, please attach a summary of the report to your application.

Other types of leave taken: Dates & Length of Leave

(1)

(2)

(3)

If I am granted a Sabbatical Leave, I will return to IUP for at least one year upon completion of my sabbatical

Signature of Applicant

Date

I have been notified, by the applicant of his/ her intention to submit this application for Sabbatical Leave.

Signature of Department Chairperson

Date

Signature of College Dean

Date

(The department chair should send a list of the number of applicants for sabbatical leave to the dean for information purposes only.)

All application materials must be submitted **by 4:00pm on Friday, March 2, 2018** according to sections D.5 and D.6 of the Sabbatical Guidelines document (page 4).

Questions should be directed to

Dr. David Martynuik
Chair, UWSLC
Department of Music
202 Cogswell Hall