

Application for Sabbatical and Special Leaves

Name: _____ Department: _____

Background Information: *(Please check as applicable)*

Have tenure: Subject to receipt of tenure:

Date tenure received: _____ Date tenure anticipated: _____

Updated C.V. is appended to application:

Information on most recent leave: *(Please check as applicable)*

Sabbatical Full year at 80%
Special Or half year at 100%
Half year at 80% Or unpaid

Date of the above: _____

Last leave report(s) is/are appended to application:

Information on leave requested: *(Please indicate)*

Sabbatical Paid Special Unpaid Special

Considered to be equivalent of sabbatical:

Other Explanation: _____

Full Year at 80% of Half year at 100% Half year at 80%

Dates of leave requested: _____

Leave location(s) with anticipated dates, length of stay: _____

Other salary anticipated as per Article 20.40 (CA): _____

Research or other grants which will/may be held at the time of the Leave as per Article 20.42 (CA):

Signature of Applicant

Date Submitted