

APPLICATION FOR SABBATICAL LEAVE

Directions: This application must be submitted through channels to the Provost/Vice President for Academic Affairs on or before February 1st prior to the academic year for which sabbatical is being requested.

FROM: _____ DATE: _____
First Name Middle Last Name

Department

I am applying for sabbatical leave during:

Academic Year _____ Fall Semester Spring Semester Fall and Spring Semester

Statement of Understanding and Acceptance:

I have read the portion of the UCO Faculty Handbook dealing with Sabbatical Leave and agree to comply with all provisions outlined therein.

As required by the Board of Regents of Oklahoma Colleges, attached is a statement outlining my "...reasons for requesting the sabbatical leave, the activities planned during the sabbatical, and a schedule of the use of time while on sabbatical leave."

If sabbatical leave is granted, I agree to sign the Sabbatical Agreement and abide by the rules therein. I understand that no later than three (3) months after my return to the University, I will submit through channels a formal report of my professional activities and accomplishments while on sabbatical leave.

Applicants Signature Date

Department Chair/School Director recommendation: Approve Disapprove
(Attach additional rationale for approval/disapproval as appropriate)

Signature Date

Dean recommendation: Approve Disapprove
(Attach additional rationale for approval/disapproval as appropriate)

Signature

Provost/Vice President Decision: Approve Disapprove
For Academic Affairs

Signature Date