**UNIVERSITY OF COLORADO, BOULDER**

# Application for Sabbatical Leave 20\_\_-20\_\_

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Name and Rank of Applicant

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College/Department

Faculty in an Institute or Museum \_\_YES \_\_NO

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Date of last sabbatical/Faculty Fellowship

Term of sabbatical requested (select only one):

AY\_\_\_\_\_\_\_\_\_\_ FALL 20\_\_\_\_\_ SPRING 20\_\_\_\_\_

**Checklist:**

\_\_ Applicant is a full-time, tenured faculty member on the Boulder Campus

\_\_ Applicant has 6 years of services to the University since last sabbatical

\_\_ Sabbatical plan form attached

\_\_ Department Chair statement form attached (if applicable)

\_\_ Current vitae attached

\_\_ Was funding investigated?

*"After six years of service to the University on regular full-time appointment, a tenured member of the faculty shall be eligible for a sabbatical assignment. It is expected that the faculty member will use the sabbatical assignment in a manner that will enhance his/her scholarly teaching competence and potential for service to the University and advance departmental program goals. A sabbatical is a privilege granted by the University for the advancement of the University, subject to the availability of resources. A sabbatical assignment is an important tool in developing academic scholarship and is a time for concentrated professional development.*

*In accepting a sabbatical assignment, the faculty member shall agree to return to the University for at least one year thereafter. In case the faculty member is responsible for terminating his/her connection with the University within the period of one year after expiration of the sabbatical, the individual shall refund the sabbatical remuneration to the University on a prorated basis, except in exceptional circumstances, including permanent disability or death, wherein neither the individual nor the heirs shall be obligated to refund any part of the amount paid while on sabbatical."*

The above is excerpted from the sabbatical policy as approved by the Board of Regents. For complete policy see Sabbatical Policy as revised by the Board of Regents November 3, 2005 at <https://www.cu.edu/regents/Policies/Policy5A.htm> and the APS effective April 1, 2008 at <https://www.cu.edu/ope/aps/1024>

***I have reviewed the Rules of the Regents with regard to the Sabbatical Leave Policy. In submitting this application, I agree to abide by these rules.***

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Applicant's Signature Date

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Department Chair's Signature Date

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Dean's Signature Date

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Institute/Museum Director’s Signature (if Date

rostered in the Graduate School)

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Provost’s Signature Date

## **SABBATICAL PLAN**

Title of Sabbatical Plan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Regent policy requires the following information be provided by each faculty member applying for a sabbatical assignment. Please complete the following questions in the space allowed:

(1) Describe your project's academic objectives, including the contribution to your professional growth and expertise.

(2) Describe your work plan (i.e., where will you spend your sabbatical, etc.).

(3) Describe how your project will advance departmental/college program goals.

(4) Describe how your project will enhance the University's reputation.

(5) Describe how your plan will contribute to the educational experience of the students.

(6) Per Regent policy, it is expected that faculty members applying for sabbatical will also apply for external funding to the extent it is available. Describe your efforts to achieve outside funding for your sabbatical.

(7) Is your half-pay sabbatical contingent upon a successful grant application?

Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_

***Any alteration to your sabbatical plan after it has been approved by the Board of Regents must be resubmitted for approval to your Department Chair and Dean. Your sabbatical plan will be a public document and, therefore, no proprietary information reflecting intellectual property issues should be included.***

**THE DEADLINE FOR APPLICATION DIFFERS FROM COLLEGE TO COLLEGE AND SCHOOL TO SCHOOL. PLEASE CHECK WITH YOUR DEAN'S OFFICE.**

## **STATEMENT BY DEPARTMENT CHAIR**

## **(If Applicable)**

Please assess the Sabbatical Plan and indicate below (next page) how you propose to cover the teaching assignments of this faculty member.

Include specific courses or numbers and levels of courses to be replaced each semester. List the replacement method/cost (i.e., Honoraria, GPTI, etc.) and list approved replacements.

Please include your assessment of the sabbatical plan.

Fall:

Spring:

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Department Chair's Signature Date

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Institute Director Signature (if applicable) Date

Approved as noted:

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Dean's Signature Date

Revised 9/2010