

**University of Southern Indiana  
College of Liberal Arts  
Request for Sabbatical (Leave of Absence, with pay)**

**Proposal Title:** \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_

**Academic Title:** \_\_\_\_\_

**Department:** \_\_\_\_\_

**Date of Initial Appointment as a full-time member of the USI faculty:** \_\_\_\_\_

**Have you had a prior sabbatical leave:** yes \_\_\_\_\_ no \_\_\_\_\_

If yes, list the date(s) of the leave

**Period of Proposed Leave** (select one):

- Fall 20xx semester at full pay \_\_\_\_\_
- Spring 20xx semester at full pay \_\_\_\_\_
- Full-year 20xx-20xx at half pay \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**Date of Submission:** \_\_\_\_\_

Recommendation of department chair with a statement forwarded to the Dean of the College of Liberal Arts, concerning how the leave of absence will be covered.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



**APPLICANT:** \_\_\_\_\_

I recommend \_\_\_\_\_ do not recommend \_\_\_\_\_

Department Chair comments are to include strategies for filling classroom assignments for a member on sabbatical leave.

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chair signature

I recommend \_\_\_\_\_ do not recommend \_\_\_\_\_

Dean comments:

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean signature

I recommend \_\_\_\_\_ do not recommend \_\_\_\_\_

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