

STATE UNIVERSITY OF NEW YORK
COLLEGE OF AGRICULTURE AND TECHNOLOGY
COBLESKILL, NY 12043

Application for Sabbatical Leave

(Please type. Attach additional information when necessary)

NAME: _____

TITLE/RANK: _____

DEPARTMENT: _____

DATE OF INITIAL APPOINTMENT: _____

DATE OF PRIOR LEAVE: _____

LEAVE REQUEST FOR: FALL _____ SPRING _____ ACADEMIC YEAR _____
(Year) (Year)

PURPOSE OF LEAVE: _____
(Specify: formal education, research, writing, travel/study, other)

SABBATICAL LEAVE PROPOSAL

Please provide a complete and detailed description of your proposed sabbatical leave, including activities you plan to accomplish during the leave, location of these activities, a schedule for completion of activities, and other information specific to your leave. Explain why a leave is essential for accomplishing your objectives.

EVIDENCE OF BENEFIT TO DEPARTMENT/COLLEGE

Explain how your leave would improve and enrich your department and the college/SUNY.

PROFESSIONAL DEVELOPMENT ACTIVITIES

Please cite and describe your professional development activities for the past five (5) years starting with the most recent, e.g., formal education, research, travel/study, publications or other such activities. Please give dates, locations, and other specifics.

SUPPLEMENTARY INCOME

Persons on leave may, with the prior approval of the President of the campus, accept fellowships, grants-in-aid, or earned income to assist in accomplishing the purposes of their leaves. In such cases, the President may adjust the leave salaries to reflect such income. Please state the sources, and amount of income you will receive.

STATEMENT OF INTENT

I have read the statements on sabbatical leaves from both the Policies of the Board of Trustees and the SUNY Cobleskill Faculty Handbook. I understand the conditions and requirements set forth in these publications and agree to fulfill them if the sabbatical leave is approved.

I intend to continue as an employee of the college for a minimum of one year upon completion of my sabbatical leave. I further understand that if I do not meet this requirement, that I agree to repay all salary earned during my sabbatical leave.

Further, I understand it is my obligation to submit a report of my sabbatical activities no later than the end of the first full semester after my return. This report, which shall be submitted to the President, will describe the activities accomplished during the leave and their benefit to the college.

I also understand that if the number of sabbatical leave awards available is exceeded by the number of approved applicants, my application for sabbatical leave may be delayed and considered in the next round of sabbatical application rankings. If approved, I understand that my application will remain active for the current and following academic year. I understand that once in applicant pool, I will not have to reapply for sabbatical leave.

Signature of Applicant

Date

I have reviewed the application for sabbatical leave and I endorse it for further consideration.

I have reviewed the application for sabbatical leave and I do not endorse it for further consideration.

Signature of the Department Chair/Immediate Supervisor

Date

I have reviewed the application for sabbatical leave and I endorse it for further consideration.

I have reviewed the application for sabbatical leave and I do not endorse it for further consideration.

Signature of the School Dean

Date

I have reviewed the application for sabbatical leave and I recommend this applicant for sabbatical leave.

I have reviewed the application for sabbatical leave and I do not recommend this applicant for sabbatical leave.

Signature of Provost/VP Academic Affairs

Date

APPC Rating Form for Sabbatical Leave Applications

Criteria for Rating Sabbatical Leave Applications

- A. Clarity of the proposal: To receive full consideration, the proposal must be understandable to the committee. Thus, the applicant is encouraged to define technical terms, to spell out acronyms, to supply sufficient detail so that the committee can appreciate the relation of the plan to the faculty member's present or intended assignments. If the proposal involves more than the faculty member's School that connection should be clearly stated and supported.
- B. Viability of the plan: The committee will weigh the practicality and worthiness of each plan. The applicant should supply sufficient evidence to show that the plan is realistic, beneficial, and achievable. For example, the committee will consider evidence that the applicant has sufficient groundwork for the sabbatical through appropriate reading, discussion with others in the field, or preliminary research.
- C. Benefits of the plan: The intended outcome of the sabbatical should be clear and concrete and in keeping with the professional aim and College assignments of the faculty member. Specific goals should be enunciated. The applicant should indicate how these goals will benefit the institution and the faculty member.

1 - Not clear in presentation and/or connection to the needs and plans of the Department/ School/College

Return to APPC by _____

2 - Needs some clarification

Return to APPC by _____

3 - Very clear and focused on the needs and plans of the Department/School/College

Clarity of Proposal: Average APPC score: _____	Viability of the Plan: Average APPC score: _____	Benefits of the Plan: Average APPC score: _____
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_____ APPC has reviewed the application for sabbatical leave and endorses it for further consideration.

_____ APPC has reviewed the application for sabbatical leave and does not endorse it for further consideration.

Signature of APPC Chair

Date