



APPLICATION FOR SABBATICAL LEAVE

Submit original application and all supporting information to your Chair (if applicable) who will then route it to the Dean and to the Office of Faculty Affairs for Provost approval.

Name:	Department:
Rank:	
Date of initial appointment at University of Miami:	Date of last sabbatical leave taken (if applicable):

1. Sabbatical leave is requested from: Begin: \_\_\_\_\_ End: \_\_\_\_\_

*Sabbatical leave may be granted for one semester at full salary, or for one academic year or two consecutive semesters at two-thirds salary.*

2. Source and amount of outside funding:

Extramural Sources: \_\_\_\_\_

Intramural Sources: \_\_\_\_\_

3. Submit the following:

- a) Detailed plan of activity during sabbatical leave.
- b) Updated curriculum vitae in standard University of Miami format.
- c) Report from last sabbatical leave (if applicable).

4. Commitments to the University of Miami:

In accepting sabbatical Leave, I recognize my obligation to return to the University of Miami for one year following the leave. Within three months of my return, I will submit a report of my activities to my Department Chair and the Dean.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Approval Signatures:

\_\_\_\_\_  
Chair Date  
(Letter of support must be included)

\_\_\_\_\_  
Dean Date  
(Letter of support must be included)

\_\_\_\_\_  
Provost Date