

## Request for Sabbatical or Unpaid Leave of Absence For Professional Improvement or Education Purposes

MaineStreet ID:

	0-	epartment					Γ					1		Faculty	☐ Salaried
Pref	fix:	First Name:			Midd	le I.:	Last	Name:					Barga	aining U	nit
Title: Date of I			Date of Hir	re: Tenure Date:				Proposed Dates of Leave:  From to							
Тур	e of L	_eave Reque	sted:			I									
	□ Sabbatical (half salary academic/calendar/fiscal year)* □ Leave without salary (for educational purposes)*														
☐ Sabbatical (full salary for semester/half year) ☐ Intergovernmental Personnel Act (IPA) leave															leave
retur	*For an employee with a work year of less than 12 months, an unpaid leave, or ½ pay sabbatical for a calendar year, may affect the individual's monthly salary upon return from leave for the remainder of the work year in which the return from leave occurs.  I request that this leave period   count  not count as part of the probationary period (if applicable).														
Years of Service in Rank:															
		or:													
Nor	Non Faculty: (Please specify)														
Re		of Previou	ıs Leav	/es										T = /=	
Dates					Leav	ve Purp	ose				Location			Pay (Fu	ull/Half/Unpaid)
Description of Planned Leave Program: Please attach a written statement describing in detail your proposed leave program, its contribution to your professional improvement, and addressing the following:  a. If you previously had a sabbatical leave, what specific changes occurred in your professional activities as a result?  b. What will your proposed leave accomplish, specifically, for you?  c. What is there about this proposal that would require a leave?  d. What are the expected benefits to the University?  e. If your leave is in cooperation with another institution or organization, include documentation of the preliminary arrangements with the host institution or organization.															
Upon completion of the above leave, I agree to submit a written report of my activities and accomplishments to my department chair, director, and dean. If leave is granted with salary, I agree to return to the University of Maine for one year, or to refund any salary paid to me by the University during this period.															
Employee Signature								Date							
Proposal for Meeting Staff Member's Responsibilities During Leave:  The department head should consult with the applicant and the administrator at the next academic/ administrative level in developing a plan for how the applicant's responsibilities, especially for how teaching, research, public service, student advising and other areas will be handled during the proposed leave period. This written plan should accompany the sabbatical/ leave request.  Attach Peer Committee Recommendation (required for sabbatical requests.)															
Approved ☐ Not approved ☐								Approve	d 🗆	Not	approved				
Departmental Chairperson/School Director Date														Date	
Approved ☐ Not approved ☐									d 🗌	No	ot approve	ed 🗌			
Vice President and Provost Date								Presider	ıt					Date	