

**ST. LAWRENCE UNIVERSITY
REQUEST FOR FACULTY SABBATICAL AND/OR FYP LEAVE
ACADEMIC YEAR 2010-2011**

Name: _____ Phone _____

Rank _____ Department _____

Type of Last Leave _____ Date of Last Leave _____

What were the professional outcomes of your last leave?

Type of requested leave for the 2010-2011 Academic Year:

____ one year sabbatical (at half pay)

____ one year sabbatical/FYP leave (one semester sabbatical and one semester FYP leave)

____ one semester sabbatical (at full pay) [____ fall semester ____ spring semester]

____ one semester FYP leave (at full pay) [____ fall semester ____ spring semester]

____ other, please explain:

Do you need to retain your office and/or desktop computer system while on leave? If so, please explain.

Depending upon departmental needs, could you consider postponing this leave for 1-2 years? If yes, please indicate the year and semester in which you would be willing to take the leave.

If you are requesting a sabbatical leave, please provide an account of the scholarly or creative work you intend to pursue and its expected outcomes.

Please submit the following items to your department chairperson/program coordinator:

- a completed copy of this form
 - a current curriculum vitae
 - Your account of the scholarly or creative work you intend to pursue and its expected outcomes (for sabbatical leaves).
-

**ST. LAWRENCE UNIVERSITY
REQUEST FOR FACULTY SABBATICAL AND/OR FYP LEAVE
ACADEMIC YEAR 2010-2011**

The department chairperson/program coordinator should respond to the following questions, sign the form, and forward all materials to the Dean's Office no later than Monday, June 1, 2009:

Will a full-time visiting faculty position be requested for this absence?

If so, will the replacement require an office and/or desktop computer system?

If the faculty member has indicated a willingness to defer her/his sabbatical, in which of the following two years would it be easiest for your department to cover this deferred leave without hiring a replacement?

Recommended by: _____ (date)
(Department Chairperson)

Approved by: _____ (date)
(Academic Dean)

Approved by: _____ (date)
(President)