CALIFORNIA STATE UNIVERSITY CHANNEL ISLANDS

Faculty Affairs Office

Application for Sabbatical or Difference-in-Pay Leave

Applicable policies: CBA Article 27; SP 04-33 Sabbatical Leaves CBA Article 28; SP 05-34 Difference in Pay Leaves

| Instructions: Eligible faculty shall use this form, together with an attached proposal and other materials, to request |
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| a sabbatical or difference in pay leave. Submit the completed form and attachments via email to the Faculty Affairs |
| Office by the announced deadline. |
| If you have questions regarding use of this form, call Faculty Affairs at 437-8485. |
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| 1. Name: |
| 2. Program Name: |
| |
| 3. Professor Associate Professor Assistant Professor* Fulltime Lecturer |
| Librarian Associate Librarian Assistant Librarian* Fulltime Counselor |
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| *A leave of absence with pay will count toward probation. It is the responsibility of the Dean to be certain that |
| the retention/tenure evaluation will be sufficient to form the basis for a retention/tenure recommendation even |
| though the faculty member is absent for all or part of the academic year. |
| 4. Employed fulltime by CSU Channel Islands since: <month> / <year></year></month> |
| 4. Employed fundine by CSO Chamiel Islands since. Milonul// Sycal/ |
| 5. Type of leave requested: |
| J. Type of foure requested. |
| A. Sabbatical Leave: |
| Instructional Faculty or Others on Academic Year Assignments: |
| One semester at full pay: <select preference=""></select> |
| |
| Two semesters at one-half pay in academic year: <select year=""></select> |
| Librarians on 12-Month Assignments: |
| Four (4) months at full pay beginning <month> / <year>, ending <month> / <year></year></month></year></month> |
| Eight (8) months at one-half pay beginning <month> / <year>, ending <month> / <year></year></month></year></month> |
| Light (o) months at one-nam pay beginning <month> / <year>, ending <month> / <year></year></month></year></month> |
| B. Difference –in-Pay Leave: |
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| Instructional Faculty or Others on Academic Year Assignments: |
| Both Fall and Spring in <select year=""></select> |
| Librarians and Counselors on 12-Month Assignments: |
| |
| Librarians and Counselors on 12-Month Assignments: Twelve (12) months beginning <month> / <year>, ending <month> / <year></year></month></year></month> |

6. If you are you considering or being considered for a fellowship, grant, teaching position, or other position that is in any way associated with this leave request, please explain:

- 7. Please attach the following materials to this application (in 4 pages or less) plus a one-page current summary CV. (No appendices other than a1-page document verifying an award of a grant, fellowship, book contract or the like shall be considered part of the application. The application should be self-contained; other appendices will not be reviewed).
 - I. Title of Proposed Activity/Project
 - II. Description of Proposed Activity/Project
 - a. Purpose/Goals
 - b. Significance
 - c. Timeline of Activity/Project
 - d. Travel or service performed during the period(s) of leave
 - III. List of CSU resources, if any, necessary to carry out Activity/Project
 - IV. Summary of work already completed on the Activity/Project
 - V. Brief description of anticipated results
 - VI. Benefits to the University and its students
- 8. I recognize that this leave, if granted, will be pursuant to Articles 27 or 28 of the MOU; I agree to abide by the terms therein should this application be approved. I acknowledge that leaves with pay are subject to completion of a Promissory Note, bond settlement, or list of assets to be submitted within 30 days of notification of approval of the leave. I understand that if I am taking a reduced-pay leave that I will not be credited for a full year of service credit for purposes of retirement (PERS), and that I should discuss the implications of this leave with a Benefits specialist in HR.

I Agree

9. Typing my name in this box and submitting via email serves as my signature on this document: