**APPLICATION FOR SABBATICAL**

Applications must be submitted to the Dean through your Department Chair

to [alesfec@ualberta.ca](mailto:alesfec@ualberta.ca) no later than **October 15**

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| --- | --- | --- | --- | --- | --- | --- |
| **Name of Applicant:** |  | | **ID#** |  | | |
| **Department** | **Choose Department** | | **Sabbatical Length** | | Choose an item. | |
| **Dates** | Choose an item. |  | **to** | Choose an item. | |  |

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| **Eligibility (please see Schedule A – Academic Faculty Members 2020-2024 Agreement: Article A4: Sabbaticals)** | | | | |
| *Article 4.01.1* | *A tenured Academic Faculty member shall be eligible to be considered for a one-year sabbatical after serving the University for 6 years, or after serving for 6 years following a previous sabbatical or assisted leave. After 3 years of service following initial appointment, or 3 years of service following a previous sabbatical or assisted leave, a tenured Academic Faculty member shall be eligible to be considered for a 6-month sabbatical.* | | | |
| 1. Date of tenure | | | |  |
| 1. Previous service toward eligibility (prior to U of A appointment, if applicable): | | | | |
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| 1. Previous sabbaticals from the University of Alberta: | | | | |
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| Other: | |  | | |
| 1. Years of Eligibility | |  |  | |

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| **Summary of Sabbatical** (if needed attach additional pages) |
| 1. **What is the overall goal of your sabbatical program?** |
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| 1. **Where and with whom do you plan to spend your sabbatical, and what factors were taken into account in selecting the location (ie, unique research capability, internationally recognized program or individual, building on existing collaborations, etc.)?** |
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| 1. **How does your sabbatical contribute to your future research/teaching directions?** |
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| 1. **What new skills/capabilities/experiences will you acquire and how will these:**   **i) contribute to your professional development and** |
|  |
| **ii) support the strategic initiatives of the Department/Faculty?** |
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| 1. **Are there any anticipated tangible outputs of your leave (ie, a book, working papers, patents, new course development, new research collaborations, etc.)?** |
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| 1. **What arrangements have been made to provide satisfactory supervision of graduate students during your sabbatical?** |
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| 1. **Discuss your teaching with Chair or deletate (ue, Division Directo) . How will teaching be covered during your sabbatical?** **List specific courses.** |
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| 1. **How will research staff supervision (if applicable) be covered during your sabbatical?** |
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| 1. **Whom will you delegate PeopleSoft HCM (eForms, Online Time Entry) during your sabbatical?** |
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| 1. **During your sabbatical, (if needed) to whom will you delegate your projects?** |
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| **Chair Comments and Recommendations** | | | | |
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|  |  |  |  |  |
|  | Chair Signature |  | Date |  |

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| Signature of Applicant |  | Date |

***This information is collected under the authority of Section 32c of the Alberta Freedom of Information and Protection of Privacy Act for the purposes of applying for Sabbatical.***