



**Recommendation for Sabbatical Leave**

Please provide a one sentence summary of the scope and aims of the sabbatical.

Indicate where the leave will be spent and why this is an appropriate location.

Comment in a sentence on the usefulness of the goals of the sabbatical to those of the unit and the University.

Confirm that this leave, if granted, is consistent with the operational requirements of the academic unit.

**Faculty Relations Verification**

Sabbatical Eligibility: Eligible  Yes  No

Salary Percentage:

Verified by:

**Approvals**

Confirm that you have:

- 1. A copy of the report of the last sabbatical, if applicable.
- 2. An up-to-date CV clearly indicating academic performance since the last sabbatical, if any.
- 3. A statement of the scope and aims of the proposed sabbatical.

Recommended

Yes  No

\_\_\_\_\_  
Department Head

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
day month year

Yes  No

\_\_\_\_\_  
Dean/Director/

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
day month year

Yes  No

\_\_\_\_\_  
Vice-President (Academic)

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
day month year