

INDIANA UNIVERSITY
BLOOMINGTON CAMPUS
APPLICATION FOR SABBATICAL LEAVE

Directions

Application Deadline

If you wish to apply for sabbatical leave for any part of the academic year 2008-2009, you should follow the procedures below:

Inform your departmental chairperson or dean by September 17 of your intention to apply for leave.

Review the information for prospective applicants found here:
<http://www.indiana.edu/~deanfac/download/sabbhmpg.html>

Submit your completed (paper) application (below) to your chairperson by October 1. Your chairperson should act on the application and then forward one copy to the Office of the Vice Provost for Academic Affairs and Dean of the Faculties and one copy to your dean by October 15. We request that you submit an additional, electronic copy of your application, by CD or e-mail attachment to dof@indiana.edu, so that your application may be incorporated into our electronic database.

Deans should forward their recommendations to the Office of the Vice Provost for Academic Affairs and Dean of the Faculties no later than November 15.

Notification of Sabbatical Leaves Committee Recommendations

If the above deadlines have been met, you should expect to receive notification on the outcome of your leave proposal in February. However, some circumstances, e.g., late arrival of an application or supporting documentation, may result in a later notification date.

Financial Considerations

There are several financial considerations that you may wish to keep in mind when planning a sabbatical leave. First, if you are on leave with half pay for the entire year, Indiana University now provides continuation of retirement benefits based only on the actual salary paid. Second, under some circumstances we allow persons to supplement their full-year sabbatical stipends with part-time teaching at their host institution. Details are included with the sabbatical leave application form packet. Third, tax benefits relating to travel and living expenses have in the past been available to you while on leave. You may wish to consult your tax advisor or tax guide.

Questions and Clarifications

Associate Dean of the Faculties Michael Hamburger chairs the Sabbatical Leaves Committee and administers the sabbatical leaves program. Please contact him at hamburg@indiana.edu or call the Office of Academic Affairs and Dean of the Faculties, Office of Academic Personnel Policies and Services, 855-0202, or e-mail sheburns@indiana.edu if you have any questions.

PLEASE READ CAREFULLY

In order to provide you with the maximum amount of time to make firm plans and arrangements, the Sabbatical Leaves Committee will process all applications as expeditiously as possible. Please help us to accomplish this by getting your applications in on time.

A faculty member's signature on the sabbatical leave application form constitutes a legally binding agreement to repay Indiana University for compensation and fringe benefit costs while on sabbatical, in the event the faculty member does not return to Indiana University for at least one year.

INDIANA UNIVERSITY – BLOOMINGTON CAMPUS
APPLICATION FOR SABBATICAL LEAVE

Name: _____ School: _____

Academic Title: _____ Dept: _____

Effective date of initial appointment as a full-time member of the faculty of Indiana University:

Periods of previous sabbatical leave: _____

Periods of leave of absence With Pay Without Pay
other than sabbatical leaves: _____

Period(s) of Leave: Check below the option for which you choose to apply:

- First semester 2008-2009, full pay Second semester 2008-2009, full pay
- 10-month academic year 2008-2009, half pay Divided leave*

*Please specify all periods (with dates) in 2008-2009 and subsequent academic years; these should add up to either five months at full salary or ten months at half salary. (See special comments under "Terms of Leave" in the attachment, Document F-II, Sabbatical Leaves of Absence Program.)

Action by Department Chairperson: Please attach a statement (a) evaluating the proposed project and (b) explaining scheduling adjustments that can be made within the department. The evaluation may be based on advice from a departmental committee, from colleagues, or from external evaluators. Whether or not the chairperson approves the application, it must be forwarded to the dean of the school and the Dean of the Faculties. [Note: Department chairs who are applying for sabbatical should solicit an independent letter of evaluation from a valued departmental colleague such as an associate chair, director of graduate studies, or other senior member of the faculty.]

I (do) (do not) recommend the approval of this sabbatical leave project. (Attach explanatory memo.)

(Chairperson) (Date)

Signature of Dean:

- Scheduling adjustments can be made within the department (or school) without need for additional resources.

(Dean) (Date)

ELIGIBILITY CERTIFICATION: _____
(Dean of the Faculties) (Date)

SABBATICAL LEAVE

1. Title of proposed sabbatical-leave project.
2. Description of project. Describe your project below. Make clear the purpose of the project and explain its rationale. Provide enough detail on procedures, time schedule, and resources so that the plan can be judged for thoroughness of planning and for feasibility. Explain how you intend to allocate your time to the different tasks you plan to undertake.

PLEASE NOTE: If you have submitted a grant application for the same research project you wish to pursue while on sabbatical leave, you may attach a copy, and on this and the following page, provide a concise summary of the plans for the proposed leave and its relation to the grant project.

(If necessary, attach extra sheets)

3. Location of Project. State the principal location of your project. Indicate plans for travel and arrangements for use of libraries, laboratories, or work with colleagues at other institutions. If you plan to work at other libraries, archives, institutions, laboratories, or the like, please indicate whether you have yet secured permission to do so.

4. Applicant's Qualifications. Summarize your academic background and accomplishments related to this project and which bear upon its probable success. Attach a current curriculum vitae and other relevant data.

5. Sources and amounts of funds. List sources and amounts of funds in the form of grant, fellowship, allowance for expenses, or payment for services (include approved teaching) during the period of the sabbatical leave. (Please note that the Academic Handbook requires that such funds must be paid for services which are consistent with the sabbatical leave program. Therefore, most regular teaching, consulting, or similar activities may not be used to supplement a sabbatical stipend.)

6. Dissemination of Information. Explain how you will disseminate the results of your research or creative activity or apply the knowledge gained during your sabbatical leave.

7. Signature of Applicant.

I have read the rules governing the sabbatical leave of absence program in the Academic Guide. I agree not to accept any employment during the period of leave that has not been explained in this application. *In the event I do not return for at least one year immediately following the sabbatical leave, I agree to reimburse Indiana University for any salary, retirement contributions, and insurance premiums paid during the sabbatical leave.*

(Signature of Applicant)

(Date)

**We request that you submit an additional, electronic copy of this application, in the form of a floppy disk, CD, or email attachment to dof@indiana.edu, in order that your application may be incorporated into our electronic database.*