

Sabbatical Leave Supervisor Recommendation

Form to be completed and signed by the immediate supervisor (e.g., department chair, division director, or school dean), attached to the applicant's proposal, and forwarded to the chair of the Sabbatical Leave Committee as one electronic file. At the same time, a copy for informational purposes, should be sent to the provost and, if applicable, the dean.

The immediate supervisor will also send their recommendation to the applicant.

Name of applicant:
Department, division, institute:
What provisions been made to cover the applicant's teaching obligations while on sabbatical leave?
What provisions been made to cover the applicant's research obligations while on sabbatical leave?
What provisions been made to cover the applicant's service obligations while on sabbatical leave?

Are there any	potential conflict of interes	sts arising from the	e sabbatical leav	e?	
Yes	No				
If there are po	otential conflicts of interest No	, have these gone	through the con	flict of interest com	mittee?
Name of perso	on completing this form: _				
Are you in sup	pport of the proposed sabb	atical leave?	Yes	No	
Why or why n	ot?				
Date complete	e file forwarded to the chai	r of the Sabbatical	Leave Committe	ee.	
Signature of In	mmediate Supervisor	Title, Ir	nmediate Super	visor Date	