APPLICATION FOR SABBATICAL LEAVE BY

(Name of faculty member)

Faculty members applying for sabbatical leave should complete items on this sheet.

	ar granted tenure: rent rank:
to t	mber of semesters completed in full-time teaching or research at the University of Mississippi price the effective date of the requested leave, either consecutively or interrupted only by official leave cence, and since my last sabbatical, if any:
Tin	ne leave is requested for:
	Fall semester of academic year 2020-2021 (6 months) Spring semester of academic year 2020-2021 (6 months) Fall and spring semesters of academic year 2020-2021 (1 year) Spring semester of academic year 2020-2021 and Fall Semester of 2021-2022 (1 year)
D	in a the salabatical leave may address will be.
Du	ring the sabbatical leave, my address will be:
	ecks indicate that I have provided information required:
	ecks indicate that I have provided information required: A. Attachment A is a detailed description of the project to be carried out while on leave, with an indication of the anticipated end-product (e.g., a book, monograph, new courses,
	ecks indicate that I have provided information required: A. Attachment A is a detailed description of the project to be carried out while on leave, with an indication of the anticipated end-product (e.g., a book, monograph, new courses, additional experience).
	A. Attachment A is a detailed description of the project to be carried out while on leave, with an indication of the anticipated end-product (e.g., a book, monograph, new courses, additional experience). B. Evidence, if such seems indicated, of my special competence to carry out the project.
	ecks indicate that I have provided information required: A. Attachment A is a detailed description of the project to be carried out while on leave, with an indication of the anticipated end-product (e.g., a book, monograph, new courses, additional experience). B. Evidence, if such seems indicated, of my special competence to carry out the project. C. A current curriculum vitae.
— Cho	ecks indicate that I have provided information required: A. Attachment A is a detailed description of the project to be carried out while on leave, with an indication of the anticipated end-product (e.g., a book, monograph, new courses, additional experience). B. Evidence, if such seems indicated, of my special competence to carry out the project. C. A current curriculum vitae. D. Copies of my faculty activity reports for the last five years. E. A statement of other compensation I anticipate during the leave and any service required for

These materials should now be presented to the faculty member's department chair.

SABBATICAL LEAVE RECOMMENDATION FOR DEPARTMENT CHAIR

To Academic Dean:		
As indicated by my statements below (and on at not recommend) (recommend subject to the sabbatical leave. My comments below include a detailed evaluation of the applicant, with particular his/her productivity as a scholar or teacher, and comments indicate any provisions necessary to and the costs involved. I understand that my recosts, even though the cost factor may have to be made.	ne indicated conditions) the ab a brief statement of the project propular reference to his/her qualification his/her service to the University. In the made for this position, should the commendation shall not be influence	ove application for osed and a more ns for the project, a addition, my e leave be granted, ed by anticipated
Sig	gnature of Department Chair	Date

SABBATICAL LEAVE RECOMMENDATION FOR ACADEMIC DEAN

	Signature of Academic Dean	Date
with any other information that may be helpf recommendation.	ur in assisting the vice chancenor in in	iaking ms/ner
sabbatical leave. The remarks below provide		
not recommend) (recommend subject to	o the indicated conditions) the ab	ove application for
As indicated by my statements below (and or	n attached pages if necessary), I (recor	nmend) (do
To Provost/Executive Vice Chancellor:		