

PLEASE TYPE

REQUEST FOR EXTENSION TO FILE SABBATICAL LEAVE REPORT

Request is due in Instruction Office no later than the sabbatical leave report due date.

Name _____

Department(s) _____

Sabbatical Leave for _____
Semester(s)/Year

I request an extension of time to file my sabbatical leave report due to extenuating circumstances. I understand that this is not an extension of time to complete the activities of the sabbatical leave.

REASON: (Please explain extenuating circumstances in detail.)

EXPECTED DATE OF COMPLETION:

DOCUMENTATION: Please include a copy of your approved Sabbatical Leave Application and any approved revisions, the report to the extent of completion, and brief documentation of completion of sabbatical leave objectives, e.g. transcripts, etc.)

Applicant's Signature

Date

Sabbatical Leave Committee Action:

Approve _____ Report Due Date _____
Disapprove _____

Copies to: Applicant
Chairperson/Director
Dean