**SABBATICAL LEAVE REPORT**

**REQUEST FOR APPROVAL**

The Sabbatical Leave document and this form are due to the Office of Instructional Services by September 1 following a Spring or full year leave, or by April 1 following a Fall sabbatical leave.

**A copy of the approved Sabbatical Leave Application and any approved revisions must be attached to the report.**

**To be completed by applicant (PLEASE TYPE):**

|  |  |  |
| --- | --- | --- |
|  Name: Type name here.Department: Type department here. | Semester[ ]  Fall [ ]  Spring [ ]  Full Year | Year: Type year here. |

1. **Describe in detail how your sabbatical leave has been beneficial to you, your students, and the district.**

Describe in detail how your sabbatical leave has been beneficial to you, your students, and the district.

1. I certify that I have completed the objectives set forth in the Sabbatical Leave Application, and subsequent revisions, if any were approved, **and that the document of those objectives is attached (see Part IV for the Sabbatical Leave Application).**

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Signature Date

*To be completed by Reviewers:*

I have reviewed and evaluated the report based on the approved proposal and subsequent revisions, if applicable.

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| **Reviewer** | **Report is Satisfactory** | **Report is not Satisfactory (Comments required)**  |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Chairperson/Director or Department Representative, if applicant is Chairperson/Director\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date | [ ]  |[ ]
|  |  |  |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Division Dean\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date |[ ] [ ]
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sabbatical Leave Committee Co-Chair (Faculty)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Sabbatical Leave Committee Co-Chair (Vice President, Instruction)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date |[ ] [ ]

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| --- | --- | --- |
| Report Committee established by Sabbatical Leave CommitteeDate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Yes [ ]  | No [ ]  |
| Report Committee submitted to Sabbatical Leave CommitteeDate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Yes [ ]  | No [ ]  |
| Result:  |

Report submitted to Superintendent/President for placement in the Library

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_