

Case Western Reserve University  
College of Arts and Sciences

REQUEST FOR LEAVE

A complete description of all leaves is contained in the Faculty Handbook ( <http://www.case.edu/president/facsen/frames/handbook/index.htm> ). Any faculty member requesting a leave should be familiar with this information, including the obligation to return to residence following the leave.

**All leaves require the approval of the dean and higher authorities as appropriate.** A faculty member anticipating a leave must notify the department chair at the earliest possible date so that the chair can determine whether the timing of the leave is consistent with departmental needs and begin arranging for coverage of classes and other responsibilities.

The faculty member shall provide the following information to his or her department chair:

1. A completed Request for Leave form.
2. A specific study proposal and an assessment of how the leave will help develop the faculty member in research, teaching, or performance.
3. A description of efforts to secure support from external sources, such efforts to include conferring with appropriate administrative officers. If external funding is in hand, please specify and attach any applicable documentation.
4. An up-to-date CV.

The department chair shall add a separate evaluation to include comments and recommendation on the specific study proposal, comments on the funding plan, and a thorough assessment of departmental needs (replacement teaching, funds, other departmental duties) during the leave. The chair is to forward a complete set of the application materials electronically to the dean's office. An incomplete leave request will be returned.

**In accordance with the Faculty Handbook, upon completion of a sabbatical leave, the faculty member is to submit a report to the dean no later than the end of the second week of classes following the conclusion of the sabbatical.**

NAME \_\_\_\_\_ RANK \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

TYPE OF LEAVE:    \_\_\_\_\_Sabbatical                    \_\_\_\_\_Pretenure Teaching Release                    \_\_\_\_\_Other

FUNDING:        \_\_\_\_\_Full Univ compensation                    \_\_\_\_\_Partial Univ Compensation                    \_\_\_\_\_No Univ compensation

                          \_\_\_\_\_Full external compensation                    \_\_\_\_\_Partial external compensation                    \_\_\_\_\_No external compensation

TERM OF LEAVE:   \_\_\_\_\_Fall Semester                    \_\_\_\_\_Spring Semester                    \_\_\_\_\_Both Semesters

                          of the \_\_\_\_\_ Academic Year

PREVIOUS LEAVE(s) (Please provide a complete list of leaves taken to date; indicate type and date. Attach a separate sheet if necessary.)

SIGNATURES:

I am aware of the conditions outlined in the above text.

Faculty Member \_\_\_\_\_

Date \_\_\_\_\_

Department Chair \_\_\_\_\_

Date \_\_\_\_\_