Gustavus Adolphus College

**Sabbatical Leave Request Cover Page**

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| **Name:** Click here to enter text. | **Rank:**Click here to enter text. |
| **Date (or anticipated date) of tenure:**Click here to enter text. | **Dates of proposed leave:**Click here to enter text. |
| **Department(s):**Click here to enter text. | **Period of proposed leave (semester or AY):**Click here to enter text. |
| **Years of full-time service at Gustavus:**Click here to enter text. | **Years credit from another institution (if applicable):**Click here to enter text. |
| **Type of proposed request:**[ ]  Scholarly and artistic activities[ ]  Professional retraining and revitalization |

**Application packet should contain the following:**

[ ]  Description of the proposed sabbatical leave

[ ]  Letter of support from the department chair

[ ]  Letters confirming arrangements for off-campus leaves, if applicable