

## Sabbatical Leave Evaluation Form

Applicant Name: \_\_\_\_\_ Department: \_\_\_\_\_

Title: \_\_\_\_\_ Date of Tenure Award: \_\_\_\_\_

Date of initial appointment as an official faculty member: \_\_\_\_\_

Dates of previous sabbatical leave(s) and leave(s) without pay: \_\_\_\_\_

Candidate meets eligibility requirements:  Yes  No

Period of sabbatical leave covered by application:  FA20  SP21  AY20 - 21

Required Application Materials: Included Not Included

- Abstract (>50 words):
- Detailed Statement of Leave Plans:  
(Goals, objectives, & methodology used)
- List of Affiliate Organizations:
- Timeline/calendar of activities
- Funding and alternate plan (if applicable)
- Statement of anticipated outcomes
- Supporting Bibliography
- Two Peer Review Letters (one off campus):
- Curriculum Vitae (max 6 pages):
- Chair Evaluation Letter:
- Statement of Intention to Return to BSU:
- Dean Approval/Signature:
- Chair Approval/Signature:

## Evaluation

Check mark whether the applicant satisfied each component

Satisfied

Incomplete

1. Application properly formatted
2. Adequacy of description and goals
3. Timetables and availability of materials
4. Ability of individual to complete the project:  
Background, previous experience, personal bibliography