

## 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[enter year]:  FA\_\_\_\_  SP\_\_\_\_  FY\_\_\_\_ - \_\_\_\_  CY\_\_\_\_

Required Application Materials:	Included	Not Included
• Abstract (>50 words):	<input type="checkbox"/>	<input type="checkbox"/>
• Detailed Statement of Leave Plans: (Goals, objectives, & methodology used)	<input type="checkbox"/>	<input type="checkbox"/>
• List of Affiliate Organizations:	<input type="checkbox"/>	<input type="checkbox"/>
• Timeline/calendar of activities	<input type="checkbox"/>	<input type="checkbox"/>
• Funding and alternate plan (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>
• Statement of anticipated outcomes	<input type="checkbox"/>	<input type="checkbox"/>
• Supporting Bibliography	<input type="checkbox"/>	<input type="checkbox"/>
• Two Peer Review Letters (one off campus):	<input type="checkbox"/>	<input type="checkbox"/>
• Curriculum Vitae (max 6 pages):	<input type="checkbox"/>	<input type="checkbox"/>
• Chair Evaluation Letter:	<input type="checkbox"/>	<input type="checkbox"/>
• Statement of Intention to Return to BSU:	<input type="checkbox"/>	<input type="checkbox"/>
• Dean Approval/Signature:	<input type="checkbox"/>	<input type="checkbox"/>
• Chair Approval/Signature:	<input type="checkbox"/>	<input type="checkbox"/>

Instructional Replacement Costs Requested: \_\_\_\_\_

## Evaluation

Check mark whether the applicant satisfied each component

	Satisfied	Incomplete
1. Application properly formatted	<input type="checkbox"/>	<input type="checkbox"/>
2. Adequacy of description and goals	<input type="checkbox"/>	<input type="checkbox"/>
3. Timetables and availability of materials	<input type="checkbox"/>	<input type="checkbox"/>
4. Ability of individual to compete the project: <i>Background, previous experience, personal bibliography</i>	<input type="checkbox"/>	<input type="checkbox"/>
5. Value of the project is identified, with regards to:		
a. To students	<input type="checkbox"/>	<input type="checkbox"/>
b. To University	<input type="checkbox"/>	<input type="checkbox"/>
c. The community	<input type="checkbox"/>	<input type="checkbox"/>
6. Letters of Evaluation: <i>Note: At least one letter must come from off campus. If applicable, a letter from the affiliated organization specifying the nature of the arrangement must be included (if this letter is used as affiliate support, it must meet the requirements specified in II.C.4)</i>		
a. Peer one	<input type="checkbox"/>	<input type="checkbox"/>
b. Peer two	<input type="checkbox"/>	<input type="checkbox"/>
c. Department Head/Chair <i>(or Dean if applicant is Chair)</i>	<input type="checkbox"/>	<input type="checkbox"/>
7. Availability of funding	<input type="checkbox"/>	<input type="checkbox"/>