APPLICATION FOR FACULTY MEMBER SABBATICAL LEAVE

Reference 1: HCC-FUSA Collective Bargaining Agreement
(http://www.hccfl.edu/dao/hr/employee-and-labor-relations/fusa.aspx)

Reference 2: Administrative procedures
(http://www.hccfl.edu/dao/president/administrative-procedures.aspx)

Steps
Please complete all blocks in section 1.

1. Faculty member completes application form and forwards to appropriate dean.
2. Dean acknowledges application and forwards to Human Resources through the Campus President
3. Human Resources verifies eligibility for sabbatical and forwards to Sabbatical Committee chairperson.

Notices
1. Stipends for tuition referenced in Art 6.20, HCC-FUSA contract cannot be used while on sabbatical leave.
2. Pay is reduced to 75% while on sabbatical leave.
3. Any changes to the sabbatical plan must be reported immediately to the appropriate dean.
4. Upon completion of the leave a Sabbatical Leave Activity Report (form 2-1-112) must be submitted within four weeks (28 calendar days) of the first contractual duty day following the leave.

Section 1. Faculty Member/Plan Information

<table>
<thead>
<tr>
<th>Name</th>
<th>Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Make selection</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Colleague ID Num (Not SSN)</th>
<th>Discipline</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Leave Work at HCC on (date)</th>
<th>Return to Work at HCC on (date)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Requested Amount of Time (e.g. 1 yr, 1 term, etc.)</th>
<th>Beginning Date of Full-time Employment at HCC</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Previous sabbatical leave</th>
<th>None</th>
<th>Yes ►</th>
</tr>
</thead>
<tbody>
<tr>
<td>From:</td>
<td></td>
<td>To:</td>
</tr>
</tbody>
</table>

Explain the purpose of the sabbatical leave. (Confine remarks to space provided.)

Continue on page 2.
APPLICATION FOR FACULTY MEMBER SABBATICAL LEAVE continued.

Describe in detail the proposed plan/activity. (Confine remarks to space provided.)

| List the name of the institution/location of travel. (Confine remarks to space provided.) |

Describe any financial support the institution will be providing. (Confine remarks to space provided.)

Describe the expected results (professional benefits of the sabbatical leave). (Confine remarks to space provided.)

Faculty member’s Signature

Date

Section 2. Acknowledgement by Dean

Remarks, if any

Date

Section 3. Acknowledgement by Campus President

Remarks, if any

Date

Remarks, if any

Remarks, if any

Date