CALIFORNIA STATE UNIVERSITY, BAKERSFIELD

SABBATICAL LEAVE FINANCIAL GUARANTEE

☐ I will furnish the President a bond, pursuant to the Memorandum of Understanding between the California Faculty Association and the California State University, to indemnify the State of California against loss in the event I do not return to render one term of service in the California State University for each term of leave. **Bond must accompany this form**.

☐ I request that the President waive said bond. I agree to return to the service of the California State University and render at least one term of service for each term of leave following my return from the leave of absence granted me. In support of this request, pursuant to the California Faculty Association and the California State University Memorandum of Understanding, I submit the following list of assets (not including PERS Retirement Funds) and/or a promissory note that is individually or collectively equal to the amount of salary paid to me during the leave as evidence of my capacity to indemnify the State of California against loss in the event of failure, through fault of my own, to fulfill this agreement. **List of assets or promissory note must accompany this form**.

I recognize that this leave, if granted, will be pursuant to the Memorandum of Understanding between the California Faculty Association and the California State University and the *CSUB University Handbook*. I agree to abide by the terms of the MOU and University Handbook, and the policies and procedures referred to therein.

_____ _____
Signature of Candidate Date

State of California)
) SS.
County of _____)

On this the _____ day of _____20___, before me,

_____
the undersigned Notary Public, personally appeared

{ } personally known to me
{ } proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledged that he/she executed it.

WITNESS my hand and official seal:

_____
Notary's Signature

NOTE: THIS PAGE MUST CONTAIN ORIGINAL SIGNATURES BY NOTARY AND APPLICANT