CALIFORNIA STATE UNIVERSITY, BAKERSFIELD
SABBATICAL / DIFFERENCE-IN-PAY
LEAVE APPLICATION

Name: _____ Desired Semester and Year of Leave: _____

Department: _____ Rank: _____

Previous Sabbaticals or DIPs: _____
Academic Year(s)

You are urged to read all of Section 480-485 of the Academic Policy Manual. A description of the proposed project, including information pertaining to criteria, merit, seniority, professional productivity, preparation for the project, and anticipated benefits to the University, should be attached to this application. Supporting documentation should be included wherever appropriate.

Your application and attachments should be sent to the Faculty Honors and Awards Committee in care of the Office of the Provost and Vice President for Academic Affairs by the application deadline.

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Title of Proposal (please be sure to give your proposal a title):

Proposal Abstract:

Type of Leave Requested:

- ☐ Difference-in-Pay Leave
  - ☐ One Semester
  - ☐ Two Semesters
- ☐ Sabbatical Leave:
  - ☐ One Semester at Full Pay
  - ☐ Two Semesters at 1/2 Pay

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Note: ***Upon acknowledging this application, the department chair is to forward a memo to the School Dean and to the Provost indicating how the leave would be covered if granted. Your comments about the merits of the proposal would also be appreciated.***

_____ _____
Department Chair's Acknowledgment *Date*

_____ _____
Dean's Acknowledgment *Date*