**COVER PAGE**

**Instructions:** Please complete all required parts of the application and obtain signatures before submitting.

1. Complete this cover page and obtain signatures; scan the cover page as a PDF.
2. Complete the application and save it as a Word document.
3. Attach a current Curriculum Vitae (In PDF or Word)
4. Submit the three attachments to Shelly Jirinec ([jirinecs@palmbeachstate.edu](file:///C:\Users\jirinecs\Downloads\jirinecs@palmbeachstate.edu)) by January 2.

Name:       Campus:

Teaching Discipline:

Purpose of Sabbatical Leave:

Travel  Professional Academic Advancement

Number of years of continuous service at Palm Beach State College:

Number of years of total service to Palm Beach State College:

Previously awarded a sabbatical at Palm Beach State College.  Yes  No

If Yes, the date sabbatical was awarded:

Are you in or beyond your 7th continuous year of full-time employment?  Yes  No

Will your Dean request (check one) Adjunct Coverage or Full-time Faculty Coverage?

Term(s) requested:  Fall  Spring

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associate Dean or Supervisor Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dean Date

|  |
| --- |
| 1. Write a concise but specific statement describing your proposed sabbatical leave. |

|  |
| --- |
| 1. State the objectives you expect to complete during the sabbatical leave. |

|  |
| --- |
| 1. In what specific ways will your sabbatical contribute to student success, to your colleagues, discipline, and Palm Beach State College? |

|  |
| --- |
| 1. Identify the specific activities and procedures you’ll perform to meet your objectives. 2. Delineate specific outcomes, skills, or competencies you will achieve due to the sabbatical. |

Below is the form for questions 4 and 5 (each objective stated in question 2 must have a completed table).

(This application section allows you to add or delete objective tables. If you need an additional table, copy and paste one. You may also delete unneeded rows or tables. Please leave the columns as is).

|  |
| --- |
| Narrative: |

|  |  |  |  |
| --- | --- | --- | --- |
| Objective: | | | |
| Activity # | Description | Expected Outcome | Timeframe |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Objective: | | | |
| Activity # | Description | Expected Outcome | Timeframe |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

(copy additional objective tables as needed).

|  |
| --- |
| 1. State explicitly how you plan to document your proposed sabbatical activities: |