



Faculty who take a Sabbatical leave are required to submit a leave report within one semester of their return. Failure to provide an acceptable report could result in the denial of subsequent Sabbatical or DIP leaves. Please keep a copy of your report for your next leave application.

ACADEMIC LEAVES WITH PAY POLICY: <http://www.csus.edu/umannual/hr/uma00175.htm>

Name:

College:

Department:

Period of Leave: Semester Fall ____ Spring ____ Academic Year ____/____ Other: _____

1. What specific goals were accomplished during your leave? Please include a full citation to any published product(s) or other dissemination resulting from your leave and/or URL to additional information as applicable.

2. What goals were partially achieved or not at all?

3. Taking your activities and accomplishments as a whole, what percentage do they represent of the initially stated goals you planned to achieve?

4. What circumstances may have prevented you from realizing all of your stated goals?

5. Who and/or what are the beneficiaries of your sabbatical efforts?

***Add additional page(s) if necessary. Please do not include entire articles, papers, or other documents with this report.*

Employee Signature: _____ Date: _____

Department Chair: _____ Date: _____

College Dean: _____ Date: _____

► **Forward completed report with all signatures above to the Office of Faculty Advancement (OFA), Sacramento Hall 155 or via campus mail to zip 6136. OFA will then forward reports to the Professional Leave Committee for review.**

► *For questions, please contact the Office of Faculty Advancement at x82913.*

FOR OFA AND PROFESSIONAL LEAVE COMMITTEE (PLC) USE ONLY:

Report Due: _____ Report Received by OFA: _____

Reviewer Signature: _____ Date: _____

Reviewer Signature: _____ Date: _____

The PLC members whose signatures appear above have reviewed this report and determined that it shall be:

Approved Not Approved

Reason report was not approved: _____

