

CLARKSON UNIVERSITY
Faculty Sabbatical Fellowship Application

NAME _____ Date _____

Title _____ Department/Division _____

Applicant faculty members should complete Parts 1 and 2; use attachments as necessary; administrators should complete Part 3 and supply indicated attachments as appropriate.

Part 1. Please specify the duration, timing, and type of the requested fellowship. (See Operations Manual section 5.9.1 for guidelines.)

- Year and semester(s) proposed for sabbatical fellowship: _____
- Type of fellowship requested:

_____ Type 1. Two successive semesters with a stipend of one-half the normal salary of the faculty member during the fellowship period.

_____ Type 2. One semester with a stipend equal to the normal salary of the faculty member during the fellowship period.

_____ Type 3. One semester with a stipend equal to one-half the normal salary of the faculty member during the fellowship period.

Part 2. Please provide a complete description of the proposed sabbatical fellowship activity including the points indicated below. Attach your description to this application.

- Describe the plan outlining developmental objectives related to your scholarship and research for the proposed fellowship, the process by which you intend to meet the stated objectives, your particular qualifications for the proposed project, and the relevance of the project to the University's mission. A current copy of your curriculum vitae should accompany your application.
- Identify external sponsors or granting agencies involved with the project. Describe periods of time you plan to spend away from the campus.
- Indicate any prospective salary and/or other income you plan to receive during the fellowship period. Please be specific. If you will receive no other income, please indicate none.
- Indicate your agreement to comply with Sabbatical Fellowship Policy 5.9.1, specifically Section IV. Completion of Fellowship, which states, "Any member of the faculty accepting a fellowship is required to return to the University for at least one academic year after the fellowship period. Faculty members, who fail to return, must reimburse the University for their salary payments and the cost of fringe benefits for the term of the fellowship. Faculty members are also required to submit to their immediate supervisors a short written summary of professional activities during the leave period."

Part 3. Administrative Endorsements and Decision – Department or Division, School, and University

Please evaluate this sabbatical fellowship application, and attach a copy of your assessment, thereto. Include in your assessment a brief statement pertaining to the likely instructional and academic obligations of the applicant, should the individual be granted the requested leave, and the approach you intend to pursue to meet those obligations.

- Statement by Applicant's Division Head or Department Chair, as appropriate.
- Statement by the Dean of Applicant's School.
- Action by Provost – after a decision is reached by the Provost, a letter of notification will be sent to the applicant, with copies to the Division Head/Chair and Dean, as appropriate.

cc: President
Director of Human Resources
Office of Budgets and Planning
Division of Research and Technology Transfer
Dean of School
Division Head or Department Chair