Southern Connecticut State University

ADMINISTRATIVE FACULTY SENATE

Administrative Faculty Sabbatical Leave Intent to Apply

BOR/SUOAF-AFSCME Contract Article 24.8

Important: Please submit to the Sabbatical Leave Committee 45 days prior to the application deadline

Application Deadlines by Sabbatical Type

Quarterly Cycle (Short-Term and Mid-Term Sabbaticals)

Intent to Apply Due	Full Application Due
November 17	January 1
February 15	April 1
May 17	July 1
August 17	October 1

Annual Priority Deadline (Long-Term Sabbaticals)

Intent to Apply Due	Full Application Due	For Sabbaticals Beginning
August 17	October 1	July 1st or later (following fiscal year)

Long-term sabbaticals may also be submitted during quarterly cycles but preference may be given to applications submitted on deadline.

Applicant Information

Name: _____ **Date:** _____

Department: _____

Position/Title: _____

Email: _____ **Phone:** _____

Supervising Administrator: _____

Years of Full-Time Service at SCSU: _____

Dates of Last Sabbatical (if applicable): _____

Administrative Faculty Sabbatical Leave Intent to Apply

PRELIMINARY SABBATICAL INFORMATION

Anticipated Type of Sabbatical:

☐ Short-Term (2-8 weeks) - *Quarterly cycle only*
☐ Mid-Term (9-26 weeks) - *Quarterly cycle only*
☐ Long-Term (27-52 weeks)* - *Select application pathway below*

Application Cycle:

(Select one based on sabbatical type and pathway)

For Short-Term and Mid-Term Sabbaticals:

☐ Winter Cycle (January 1 application deadline)
☐ Spring Cycle (April 1 application deadline)
☐ Summer Cycle (July 1 application deadline)
☐ Fall Cycle (October 1 application deadline)

For Long-Term Sabbaticals - Priority Deadline (Recommended):

☐ Annual Priority (October 1 application deadline)

For Long-Term Sabbaticals - Quarterly Option:

☐ Winter Cycle (January 1 application deadline)
☐ Spring Cycle (April 1 application deadline)
☐ Summer Cycle (July 1 application deadline)
☐ Fall Cycle (October 1 application deadline)

Tentative Sabbatical Timeline:

Preferred Start Date: _____ Preferred End Date: _____

PRELIMINARY PROJECT INFORMATION

Working Title of Project: _____

Brief Project Description (200-300 words): *Provide a general overview of your sabbatical project idea, including its purpose and main activities.*

Administrative Faculty Sabbatical Leave Intent to Apply

Primary Focus Area(s): *(Check all that apply)*

- ☐ Professional Development/Training
- ☐ Administrative Process Improvement
- ☐ Scholarly Research
- ☐ Program Development
- ☐ External Partnership Development
- ☐ Other: _____

Preliminary Alignment with University Priorities: *Briefly describe how your project aligns with the university's R2 mission and strategic goals.*

Anticipated Institutional Benefits: *Briefly describe how your project might benefit the university.*

Support Needs Assessment

Areas where you anticipate needing guidance: *(Check all that apply)*

- ☐ Refining project scope
- ☐ Developing timeline and milestones
- ☐ Understanding application pathway options (for long-term sabbaticals)
- ☐ Budget development and resource planning
- ☐ Identifying alignment with institutional priorities
- ☐ Developing knowledge transfer strategies
- ☐ Understanding funding allocation and competition
- ☐ Other: _____

Do you have any specific questions for the committee at this time?

Would you like to schedule a consultation with the committee prior to submitting your full application?

☐ Yes
☐ No

Preferred consultation format:

☐ In-person meeting
☐ Virtual meeting
☐ Written feedback only

COMMITTEE NOTIFICATIONS

I understand that upon submission of this Intent to Apply form, the Sabbatical Leave Committee will notify:

☑ My supervisor
☑ My division's Vice President
☑ Human Resources Department

These notifications help initiate early planning discussions regarding operational coverage and resource requirements. The committee will provide a process overview and specialized guides designed specifically for supervisors and vice presidents to help them understand the sabbatical process and effectively evaluate your application.

I would like the committee to include the following additional information when notifying my supervisor and VP:

ACKNOWLEDGMENT

I understand that this Intent to Apply form is required as part of the sabbatical application process. I acknowledge that while this form initiates the process, I must still submit a complete Sabbatical Leave Request Form by the appropriate application deadline to be considered for a sabbatical leave.

I also understand that submission of this form authorizes the Sabbatical Leave Committee to reach out to me with guidance, resources, and support related to developing my sabbatical application.

I acknowledge that:

- Deadlines and timelines may be modified by the Administrative Faculty Senate President
- My application may proceed through the review process even without recommendation at a prior level
- If my application receives a negative recommendation at any level, I am encouraged to work with those reviewers to address concerns

Signature: _____ Date: _____

FOR COMMITTEE USE ONLY

Date Received: _____

Initial Assessment:

- ☐ Project concept appears well-aligned with sabbatical objectives
- ☐ Project concept requires refinement in certain areas
- ☐ Project concept may need significant redirection

Committee Contact Person: _____

Initial Feedback Provided:

- ☐ Via email (Date: _____)
- ☐ Via consultation (Date: _____)
- ☐ Via written feedback (Date: _____)

Notifications Sent:

- ☐ Supervisor notification sent (Date: _____)
- ☐ Vice President notification sent (Date: _____)
- ☐ Human Resources notification sent (Date: _____)

Additional Notifications:

- ☐ Department coverage planning meeting scheduled (Date: _____)
- ☐ Applicant added to sabbatical planning workshop/orientation (Date: _____)
- ☐ Human Resources has verified employee eligibility (Date: _____)
- ☐ Notification of Intent sent to University President (Date: _____)

Follow-up Actions:

_____

_____

_____

Committee Chair Signature: _____ Date: _____