APPLICATION FOR SABBATICAL/RESEARCH LEAVE

Please return this form to your Department Administrator, for review and approval by the Department Chair. Following approval, the department must send the form to the FAS Office for Faculty Affairs by December 1, 2017.

FAS policies on leaves are in Chapter 3 of the FAS Appointment and Promotion Handbook, which is available at http://academic-appointments.fas.harvard.edu/.

Name: ____________________________ Date: ________________

Title: ______________________________

Department(s): ______________________

1) Duration of leave:
   _____Full academic year 2018-19        _____Fall 2018        _____Spring 2019

2) Distribution of FAS salary while on leave:
   _____Full academic year 2018-19 at half salary
   _____Fall term 2018 at full salary
   _____Spring term 2019 at full salary
   _____Other: _______________________

   Please note: For this purpose, salary refers to the compensation paid by the FAS, not from grants. See also section 6.

3) Please detail any special circumstances, if applicable.

4) Please describe the purpose and planned activity for the leave period.
5) If you are applying for research leave and expect to have any portion of your leave salary paid *through Harvard* from grant, fellowship, or contract funds, please indicate the anticipated source of funding, the amount, and the coding.

6) If you expect to receive compensation *directly from non-Harvard sources* (ACLS, NEH, Guggenheim Foundation, etc.), please list anticipated purposes, sources, and amounts of support below. Should substantial changes in these plans occur, they should be reported to the Dean’s office.

<table>
<thead>
<tr>
<th>Purpose (travel, salary, research expenses):</th>
<th>Source:</th>
<th>Estimated amount:</th>
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7) Please list courses (including General Education courses) you would normally teach during the period of anticipated leave and show arrangements that have been made for them in your absence.

<table>
<thead>
<tr>
<th>Course/term</th>
<th>Substitution arrangements</th>
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8) Please describe how you will continue to supervise the dissertation students for whom you are principal advisor.

9) Please describe arrangements that have been made for continuation of any administrative duties for which you are responsible.

Date

Signature

Date

Chair of the Department

Date

Chair of other Department(s), if jointly appointed

Date

Divisional Dean / Area Dean