

Administrative Support Form
To accompany PD Time and Sabbatical Applications

Name of Professional Development Time or Sabbatical Applicant

Application for release time in _____ (give semester and year)

This is an application for Sabbatical PD Time

Title of Project

Applicant Signature

Date

To be completed by Department Head

I have been notified of this request

Signature

Date

Please comment on the appropriateness or necessity of the proposed project. If the project involves development of a new course, please explain how the course fits into the curriculum and indicate when the course would be offered. If you know of reasons why Faculty Development should not support this proposal please provide this information.

One copy of the completed and signed form should be submitted to the Director of Faculty Development.

Revised October 2009