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| **College/School:** | |  | | | | | | | | | |
| **Department/School:** | |  | |  | | |  | | | | |
| **Name:** |  | | | | | **Unid:** | | | |  | |
| **Current Rank/Title:** | |  | | | | **Tenure Status:** | | | | Tenured   Under Tenure Review | |
| **Tenure-track appointment date:** | |  | | | **Date of Last University of Utah Sabbatical:** | | | | | |  |
| **Please list other leaves of absences granted in the past six years (*e.g. faculty fellowships, unpaid leave, parental leave)*** | | | | | | | | | | | |
| ***Type of Leave:*** | | | | | | | | ***Timeframe/Year:*** | | | |
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| **Requested Sabbatical Timeframe (A faculty sabbatical leave may be taken for one or two semesters or for one, two, three or four half-semester “sessions.”):**  Fall Semester  Spring Semester  Academic Year  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | |
| **Expected location(s) during leave:** | | |  | | | | | | | | |
| **Please provide a concise 1-2 paragraph description of your scholarly/research/creative activities plan for the leave. Include how this plan will benefit you as a faculty member and the University. Finally, please remember that this summary will be read by multiple audiences outside your discipline; therefore, please avoid or explain discipline-specific language accordingly.** | | | | | | | | | | | |
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| **Other Requirements:**   1. University policy limits the total salary a faculty member may earn while on sabbatical. This limit refers to salary paid on any W-2 form, not to consulting income. The Federal Office of Management and Budget Circular A-21 allows for a maximum of 100% of annual base salary from any source of funds at the University (i.e. funds 1001, 2XXX, 5000, 6XXX). The university will reduce the amount of sabbatical salary it pays if a faculty member receives salary from other sources exceeding the limits described on this form. 2. “‘Annual base salary’ means the total compensation approved in advance as the amount payable to a faculty member for normal and expected working time and effort, not in excess of 100% of full-time, for all services to be performed under all assignments during the appointment period. This term does not include compensation for separate assignments during nonworking intervals, approved overload assignments in the Division of Continuing Education, additional compensation for occasional services or payments made pursuant to authorized consulting or professional service contracts.” 3. Salary from sources not associated with the University is subject to the salary limits in Policy 6-314 which limits a combination of university funds and funds not associated with the University to 110% of the annual base salary. 4. In addition to completing Appendix B below, by May 15th immediately prior to the beginning of the academic year in which your sabbatical will occur, submit the Academic Sabbatical Confirmation form to your department chair and to the Office for Faculty. This information is necessary to set up your pay properly for the coming fiscal year. 5. Within three months of the end of your sabbatical leave, you must submit a report of your sabbatical activities to your dean and the Office for Faculty. 6. If you are a Principal Investigator (PI) on a grant or contract and you are away from the University for more than 90 days during your sabbatical, you must contact your funding agency and appoint a substitute PI. If you have questions about this policy, contact Brent Brown, Director, Office of Sponsored Projects. | | | | | | | | | | | |
| **I understand and agree to comply with the requirements above.** | | | | | | | | | | | |
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| *Faculty Applicant Signature* | | | | | | | | | *Date* | | |

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| **Appendix A:**  **Detailed Description of Proposed Sabbatical Activities** | | | | | | |
| Please provide a detailed description of the general purpose, specific objectives, and scholarly/research/creative activities of the leave, including the expected benefit to you as a faculty member and to the University. | | | | | | |
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| **Appendix B:**  **Academic Sabbatical Compensation Summary (ASCS)** | | | | | | |
| University policy limits the total salary a faculty member may earn while on sabbatical. This limit refers to salary paid on any W-2 form, not to consulting income. The Federal Office of Management and Budget Circular A-21 allows for a maximum of 100% of annual base salary from any source of funds at the University (i.e. funds 1001, 2XXX, 5000, 6XXX). The university will reduce the amount of sabbatical salary it pays if a faculty member receives salary from other sources exceeding the limits described on this form. | | | | | | |
| “‘Annual base salary’ means the total compensation approved in advance as the amount payable to a faculty member for normal and expected working time and effort, not in excess of 100% of full-time, for all services to be performed under all assignments during the appointment period. This term does not include compensation for separate assignments during nonworking intervals, approved overload assignments in the Division of Continuing Education, additional compensation for occasional services or payments made pursuant to authorized consulting or professional service contracts.” | | | | | | |
| Salary from sources not associated with the University is subject to the salary limits in Policy 6-314 which limits a combination of university funds and funds not associated with the University to 110% of the annual base salary. | | | | | | |
| **Please list the amount and source of all supplemental salary for which you have a COMMITMENT or for which you have APPLIED.** | | | | | | |
| **Commitments** *(Confirmed sources of funding)***:** | | | | | | |
| **Description:** | **Source/Fund:** | | **Amount:** | | | **% of base salary:** |
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| **Applications (***Pending sources of funding***):** | | | | | | |
| **Description:** | **Source/Fund:** | **Amount:** | | **% of base salary:** | | **Status of Request:** |
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| I certify that the information provided on this form is complete and accurate. | | | | | | |
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| *Faculty member’s signature* | | | | | *Date* | |