Application for Leave of Absence
(to be submitted to department chair by applicant)

Sabbatical applications due November 15
Unpaid leave applications due at least 6 months before start of leave

Name and Title: __________________________________________________________ Date: 

Dept: __________________________________________________________ College: 

Length of service at UNH, including present academic year: 

Type of leave requested: (check as appropriate and state relevant year)
1. Sabbatical: 
   Leave with full pay (1 semester): Fall/year_________ Spring/year_________ 
   Leave with half pay (2 semesters): Fall/year_________ Spring/year_________

2. Leave without pay: 
   Duration: Fall/year_________ Spring/year_________ Other_________

Do you request continuation of benefits: Yes* ________  No ________
(*if yes, applicant must make arrangements with HR)

Dean's signature needed for continuation of benefits: ____________________________________

Is any part of the leave contingent upon outside funding?  Yes _____  No _____
If so, please explain in detail. (What sort of funding is sought? When would award be announced?)

Note: acceptance of an internal UNH award, such as Humanities Center Fellowship or a Faculty Scholar award, relieves 
the recipient of teaching duties but is not considered a leave of absence. Such awards do not stop either the sabbatical or 
tenure clock.

History of previous leaves at UNH. Note: the sabbatical clock begins at the start of the academic year after the 
sabbatical. Leaves without pay normally stop the sabbatical clock.

Date (e.g., fall 2019, fall & spring 2019-20):  
__________________________________________  ________________
__________________________________________  ________________
__________________________________________  ________________
__________________________________________  ________________

Type of leave (e.g., sabbatical at full pay, half pay, no pay):  
__________________________________________  ________________
__________________________________________  ________________
__________________________________________  ________________
__________________________________________  ________________

Signature of applicant: ___________________________________________  Date: ____________
Signature of dept. chair: __________________________________________  Date: ____________
Signature of dean: ______________________________________________  Date: ____________

Verified: _____ 6 years full-time service  _____ Proposal qualifies  _____  
If applicable, report received after last sabbatical

Signature of Provost: __________________________________________  Date: ____________
I. Attach a copy of full, current curriculum vitae.

II. In one sentence, what is the purpose of this leave?

III. Use the remainder of this page to describe the project to be undertaken during the leave of absence. This should be a synopsis of the project comparable to a summary that might accompany an application.
To be completed by the department chair

I. Please indicate the arrangements that will be made to provide the courses and services for which the applicant is normally responsible, specifying in detail any replacement costs that will be required.  
   Note: One-semester sabbatical leaves do not free up any money for replacement teaching. In the absence of other funding, replacement staff may not be provided.

II. Please give your evaluation of the applicant's program for the proposed leave of absence. You should comment on both the substance of the project and how the leave might contribute to the professional development of the applicant. Comment also on the outcome of the most recent prior leave, if applicable.

Signature of dept. chair: __________________________________________________ Date: _________