Professional Leave 2014-15

Print Form

All applicants must fill out this form in its entirety.

Please remember that professional leaves are competitive The quality of your proposal will be evaluated against the following criteria: value of the project, including its originality and potential contribution; adequacy and feasibility of the project in relation to the length of the leave period; clarity and completeness of the proposal, including readability by a layperson and references to relevant scholarship; project's potential for contributing to the faculty member's professional development; and potential for disseminating and/or applying anticipated development of curricular and instructional activities.

3.1.1.1 Full Name

Department and Address (Complete address for regional campus faculty)

3.1.1.2

3.1.1.3 Official Title

3.1.1.4 Basis of Present Employment Academic ☐ Annual ☐

Full time ☐ Part time ☐ State ☐ Extramural Funding ☐

3.1.1.5 Date of initial appointment to permanent position

3.1.1.6 Dates of previous leaves and leaves without pay. Include a summary of where such leaves were spent and the academic accomplishments from these leaves. *(Continue on attachment if necessary)*

3.1.1.7 Period of leave covered by application

3.1.1.8 Abstract of project not to exceed 50 words. Summarize the proposed activities in clear, concise language understandable to a scholar outside your discipline. Project locations must be indicated.

3.1.1.9 Prospectus: Detailed statement of leave plans (maximum of 5 pages plus bibliography with standard margins and font). **Please address items A-F in attached leave plan.**

A. Purpose and Significance: Describe the nature and significance of the project including a concise statement of the objectives for the project and your aims in undertaking it.

B. Work to be Accomplished: Describe what you plan to do during the award period. Identify the location of the work and the persons, foundations, institutions, departments or organizations (if any) with whom you will work. Describe the professional activities to be undertaken in terms that an educated reader from outside your field can understand.
(continued)

C. Projected Results: Describe the results that your project will have and how you will share your results with others (e.g., publication, presentation, exhibition, classes). Include, when possible, the time sequence for completion of individual project segments.

D. Bibliography: Publications of leave applicant or other exhibits relating to project. Brief background information or bibliography of professional and scholarly work in the area of the proposed project.

E. Justification: (maximum one page): Statement regarding value of project in terms of benefits to University following leave period. How will the project contribute to your teaching (be specific with course titles, number of students taught)? How will it contribute to your own scholarly development? How will this project benefit your department, college, and/or the University as a whole?

F. Evidence of Effort of Intent to seek External Funding: ***All professional leave requests must be accompanied by an effort to secure external funding.*** Please list the funding agencies to which you plan to apply and the deadlines for submission of proposals. In addition, list all grants and stipends, including those from the University, and other forms of compensation and assistance that will be available during leave period or for which application has been made.

3.1.1.10 List of universities, institutions, or other organizations, if any, with which you will be affiliated during leave period. Indicate the facilities and personnel of particular relevance to your project.

3.1.1.11 Salary during leave period to be covered from outside funds. Provide dollar amount and indicate the period covered.

3.1.1.12 A curriculum vitae that, at a minimum, highlights information about the progress made since the last professional leave. **please send CV with application.**

3.1.1.13 Justification of all state-supported travel, if any, in terms of project. State may not support travel to and from your professional leave location.

3.1.1.14 Signed contract. **Please Print contract, sign and send with application.**

CONTRACT (Refer to 3.1.1.14)
WASHINGTON STATE UNIVERSITY
Professional Leave Repayment Agreement

In consideration of the award of professional leave in accordance with my previous request as approved by the Provost of the University, I agree to submit a written report of my activities during the leave through my department chair or appropriate immediate administrator to the Dean, with a copy to the Provost's Office, by the appropriate due date (April 1 for those who return from leave on approximately January 1 or November 1 for those who return from leave on approximately August 16). I also hereby agree to refund or repay to Washington State University all salary, compensation, or remuneration received from the University during the period of my professional leave if, upon the conclusion of my leave or at the commencement of the succeeding semester, I fail to return to University service for a period at least commensurate with the amount of leave so granted.

This repayment agreement is entered into as compliance with RCW 28B.10.650. It is my understanding that Washington State University will not require, by virtue of this agreement, any refund or repayment obligations not required by law.

I do not, by virtue of this agreement, concede that RCW 28B.10.650 requires any refund or repayment obligation where failure to return to service is caused by death, illness, or factors beyond my control.

As an employee of Washington State University, I understand that I am bound by the University's standards of faculty conduct, and Intellectual Properties policy as set forth in the Faculty Manual.

This agreement constitutes the complete, final and exclusive agreement regarding professional leave repayment between the employee and Washington State University. Further, there are no other agreements, verbal or written.

_____ _____
Employee Date

Approvals:

_____ _____
Department Chair Date

_____ _____
Dean Date

_____ _____
Chancellor (if applicable) Date

_____ _____
Provost Date

Note: Approved copies will be returned to employee, chair, dean, and chancellor.

3.1.2 Signed statement from the department chair (or equivalent), the dean, and the Chancellor for faculty located at a regional campus. The statement should read:

> "This professional leave is recommended with the understanding that the departmental or area operations will not be jeopardized by the awarding of this leave and that the granting of this leave will not result in any additional dollar cost to the University."

_____ _____

Department Chair Date

3.1.3 If appropriate, signed statements from facilities and persons important to the success of the project to demonstrate their availability during the leave period.

3.1.4 Two letters of recommendation for the leave.