



INDIANA UNIVERSITY BLOOMINGTON

Faculty Sabbatical Leave Application Department Chair / Unit Head Decision Form

Dear colleague, below is the sabbatical leave application from Wen Qi. Please review the application and record your decision at the end of this form. Once you complete the review, this application will be routed to the dean's office.

Note: Please do not change any of the pre-filled content in this form.

If you have any questions, please contact vpfaa@iu.edu. Thank you.

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Faculty Sabbatical Leave Application Department Chair / Unit Head Decision Form



INDIANA UNIVERSITY BLOOMINGTON

! Unable to log in with the information provided.

Please log in.

RecipientExternalDataReference 57600



Note: If you see an error message (see screenshot below) when opening the form link, please click the right arrow to proceed. This will take you to the review form. You may need to click it twice.

Note: content on this page will be pre-filled in the form. Please do not change.

Applicant information

Last Name:

test

First Name:

test

Academic Title:

test

School/College:

test

Home

Department(s):

(If no department,
please enter "None")

test

Applicant's IU Email:

test@iu.edu

Email of Dean's office:

test@iu.edu

Application

submission date:

August 8, 2024

Note: content on this page will be pre-filled in the form. Please do not change.

Periods of previous sabbatical leave, if applicable:

test

Periods of previous leave of absence other than sabbatical leaves **with pay**:

test

Periods of previous leave of absence other than sabbatical leaves **without pay**:

test

Note: content on this page will be pre-filled in the form. Please do not change.

Type of sabbatical leave requested for the academic year:
(The four options are: First semester, full pay / Second semester, full pay / 10-month academic year, half pay / Divided leave)

Divided leave (please enter the begin and end dates in the next question)

If "Divided leave" was selected for the previous question. Below are the begin and end dates of leave requested:

Begin date in fall semester:

test

End date in fall semester:

test

Begin date in spring semester:

test

End date in spring semester:

test

Note: content on this page will be pre-filled in the form. Please do not change.

Title of proposed sabbatical-leave project.

test

Description of project. Describe your project below. Make clear the purpose of the project and explain its rationale. Provide enough detail on procedures, time schedule, and resources so that the plan can be judged for thoroughness of planning and for feasibility. Explain how you intend to allocate your time to the different tasks you plan to undertake.

PLEASE NOTE: If you have submitted a grant application for the same research project you wish to pursue while on sabbatical leave, you may attach a copy below the textbox. In the description here, please provide a concise summary of the plans for the proposed leave and its relation to the grant project.

test

Upload a copy of the grant application for the same research project you wish to pursue while on sabbatical leave here:

<https://iu.col.qualtrics.com/WRQualtricsSurveyEngine/XXXXXXXXXX>

Note: to see the file uploaded by the applicant, please copy and paste this link into a browser.

Note: content on this page will be pre-filled in the form. Please do not change.

Location of Project. State the principal location of your project. Indicate plans for travel and arrangements for use of libraries, laboratories, or work with colleagues at other institutions. If you plan to work at other libraries, archives, institutions, laboratories, or the like, please indicate whether you have yet secured permission to do so.

test

Applicant's Qualifications.

Summarize your academic background and accomplishments related to this project and which bear upon its probable success in the space below.

test

Note: to see the cv uploaded by the applicant, please copy and paste this link into a browser.

Attach a current curriculum vitae and other relevant data.

https://iu.co1.qualtrics.com/WRQualtricsSurveyEngine/File.php?F=F_INCBIKXg24EVT

Note: content on this page will be pre-filled in the form. Please do not change.

Sources and amounts of funds.

List sources and amounts of funds in the form of grant, fellowship, allowance for expenses, or payment for services (include approved teaching) during the period of the sabbatical leave. (Please note that campus policy requires that such funds must be paid for services which are consistent with the sabbatical leave program. Therefore, most regular teaching, consulting, or similar activities may not be used to supplement a sabbatical stipend.) Please indicate to what degree your sabbatical plan will be dependent on the availability of these funds, and how the sabbatical plan will be modified if the funds are unavailable.

test

Dissemination of Information. Explain how you will disseminate the results of your research or creative activity or apply the knowledge gained during your sabbatical leave.

test

Department Chair / Unit Head Decision

After review the sabbatical leave application of [REDACTED], I have decided to:

- Support the sabbatical leave request
- Not support the sabbatical leave request at this point
- Need more information to make a decision

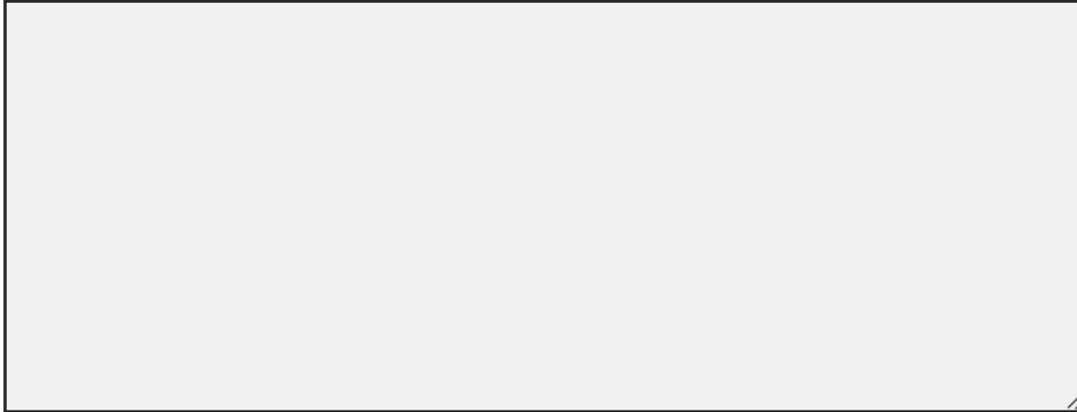
Please upload your evaluation statement here. Your statement should include 1) proposed schedule adjustments, additional staff or expenditures that may be necessary, and 2) specific evaluation of the faculty members' project. If you need further clarifications, please refer to the [Bloomington policy](#) for more information.

Drop files or click here to upload

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Please list the additional information needed to make a decision below:



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Note: This question will be displayed if “need more information to make a decision” was selected in the previous question.

Signature of Department Chair / Unit Head

Your name:

IU email:

August 8, 2024

Thank you for your review. Please click "Submit" to record your decision.

BACK

SUBMIT