SABBATICAL AND OTHER LEAVE REQUEST FORM

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Office of the **Provost and Vice-President (Academic)**

Name:	Appt date: End Date:
· · · · · · · · · · · · · · · · · · ·	II
Category of Appointment: Tenured/Confirmed	Preliminary (Tenure-track) Faculty: Fre (eg .5) (Home
Sabbatical Leave	Other Leave
1st sabbatical ()2nd or subsequent sabbatical	\frown Leave of absence \frown Leave for Academic or
o o .	No without pay Professional Development
f requesting a second or subsequent OYes O sabbatical, do you wish to receive the research	No Other Please specify:
leave grant (\$2,000)?	Remuneration (% of salary)
Requested date(s): Start date:	End date:
(for split sabbatical) Start date:	End date:
Statement of the purpose of leave (approx 50 words):	
Maternity/Parental Leave	
-	ental Leave
Anticipated leave Start date:	End date:
Doctor's certificate attached:	
Please note: For maternity and parental leave, the signatur confirmation will be issued directly by Human Resources on a	ures below represent acknowledgement and not approval. Final
Are you currently receiving an external grant adminis	stered by Carleton University Research Office? Yes 🔿 No
Requested by:	
Applicant (print name)	(signature) (date)
	(signature) (date)
Applicant (print name) Recommended by: Chair/Director/Dept Head (Library) (print name)	
Applicant (print name) Recommended by: Chair/Director/Dept Head (Library) (print name) Recommended by: .ibrarians only	ame) (signature) (date)
Applicant (print name) Recommended by: Chair/Director/Dept Head (Library) (print name) Librarians only Associate University Librarian (print name) Research Leave Grant & written statement	ame) (signature) (date)
Applicant (print name) Recommended by: Chair/Director/Dept Head (Library) (print name) Recommended by: ibrarians only Associate University Librarian (print name) & written statement approved by: Dean/University Librarian (print name)	e) (signature) (date)
Applicant (print name) Recommended by: Chair/Director/Dept Head (Library) (print name) Librarians only Associate University Librarian (print name) Research Leave Grant & written statement approved by:	e) (signature) (date)

SUBMIT TO THE PROVOST AND VICE-PRESIDENT (ACADEMIC) FOR APPROVAI



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Before completing this form, please consult Articles 20 and 21 of the collective agreement between Carleton University and the Carleton University Academic Staff Association (CUASA). Should there be any discrepancies between the collective agreement and this form, the collective agreement is considered the final authority. For any questions about sabbaticals and leaves, entitlements, or completing this form, please contact your departmental administrator and/or dean's office.

Deadlines: Sabbatical/Administrative Leave: Applications must be submitted to the office of the dean/university librarian no later than October 31 of the academic year preceding the leave. In addition, no later than three months before a sabbatical, administrative leave, or leave of absence without pay, the applicant shall submit a written statement to the dean describing in detail the nature and location of the activities to be undertaken during the period. For a sabbatical or administrative leave, this shall include estimated travel expenses and expected income, if any, over and above the normal allowance. **Parental Leave:** Applications must be submitted to the office of the dean/university librarian 15 weeks prior to the expected due date and supported with a medical certificate.

Section A: The applicant shall enter their name, rank, category of appointment, start and end date of current appointment, and academic unit affiliations, including FTE.

Section B: The applicant will provide information about the requested leave, including the type of leave requested, remuneration of salary, requested start and end dates, and the purpose of the leave.

Section C: This section is for notification of impending maternity or parental leave. The employee will indicate the type of leave, and the anticipated start and end dates.

Section D: The applicant will indicate whether s/he is receiving an external grant.

Section E: The applicant shall sign and date the form to confirm that the information presented is correct and will submit the form to the Chair or Director of his/her academic unit.

Section F: The Chair or Director of the Academic Unit or the Librarian Department Head shall sign and date the form to confirm the information presented is correct and his/her approval of the leave, and will submit the form to the Dean (Faculty and Instructors) or Associate Librarian (Librarians).

Section G: (Librarians only) The Associate Librarian shall sign and date the form to indicate her/his approval of the leave and will submit the form to the University Librarian.

Section H: The Dean or University Librarian shall verify that: the information is correct; the applicant is eligible for the research leave grant of \$2,000 (for second and subsequent sabbaticals, if requested); that the statement of purpose of sabbatical has been completed; that all necessary supporting documentation is included with the requested. The Dean or University Librarian will sign the form to confirm approval of the leave and will submit the form for approval to the Vice-President (Research and International).

Section I: The **Vice-President (Research and International)** shall review the form and the sabbatical or administrative leave plan and sign and date the form to confirm his/her approval of the leave and forward the form to the Provost and Vice-President (Academic). Signature is not required for LWOP or parental leaves.

The **Provost and Vice-President (Academic)** will confirm approval of the leave and issue a formal letter to the applicant with a copy to the Dean, the Chair or Director, the Assistant Vice-President (Human Resources), the Assistant Vice-President (Finance), and the Office of Institutional Research and Planning. The office of the Provost and Vice-President (Academic) shall send a signed copy of the form to the Assistant Vice-President (Human Resources) to coordinate the formal arrangements for <u>maternity and parental leaves</u> and a signed copy of the form to the Director, Research Services to address external grant issues <u>for leaves of more than 12 consecutive months</u>.

The personal information requested on this form is collected in accordance with Sections 38(2) and 41(1) of the Freedom of Information and Protection of Privacy Act (FIPPA), R.S.O. 1990, c.F.31 as amended. The information provided will not be used for any purposes other than those stated upon this form unless the applicant provides express written consent. Should you have any questions concerning your personal information, please contact the Executive Assistant, OPVAC, FIPPA Representative, (613)520-3884. Carleton University is fully compliant with FIPPA and endeavours at all times to treat your personal information in accordance with this law.

