



# ASF SABBATICAL APPLICATION

**Applicant Name:**

**Position:**

**College / Department:**

**Length of ASF Service:**

**Date of Previous Sabbatical (if any):**

**Date of Requested Sabbatical:**

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Attach a **Statement of Purpose** of *no more than five pages* that includes the following:

**Rationale:** Explain your proposed additional study or other endeavors and how it will enhance your contribution to Winona State University.

**Goals:** Specify desired outcome(s), what form the outcome(s) will take, and how you will share your results with others.

**Work Plan:** Describe what you plan to do and how you expect to accomplish it.

**Timeline:** List the dates of proposed sabbatical and highlight significant milestone events you are anticipating.

**Supporting Information:** Provide any additional information, such as related expertise and interests, professional activities, access needed or affiliations with other organizations, etc.

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All application materials should be submitted as one document electronically AND a hard copy to your supervisor by November 1. A decision by the President will be made by December 15.

If a sabbatical is approved, you must submit a written report to your supervisor within 30 days of return from the sabbatical detailing what you accomplished on the sabbatical and how the accomplishment related to the Statement of Purpose.

**Applicant Signature:** \_\_\_\_\_

**Application Date:**

**TO BE COMPLETED BY SUPERVISOR**

Supervisor comments / recommendations:

Plan to cover applicant work assignments during leave:

**Supervisor Signature:** \_\_\_\_\_

**Date:**

**TO BE COMPLETED BY VICE PRESIDENT**

Vice President comments / recommendation:

**Vice President Signature:** \_\_\_\_\_

**Date:**

**TO BE COMPLETED BY PRESIDENT**

President's approval of sabbatical request                      Approve

President's denial of sabbatical request                      Deny

President's comments:

**President Signature:** \_\_\_\_\_

**Date:**