SABBATICAL LEAVE
West Virginia University and Regional Campuses

Section 1. General

1.1 This policy establishes a uniform sabbatical leave policy for faculty members.

1.2 Authority. – W. Va. Code §18B-7-2

1.3 Effective Date. – April 12, 2002

Section 2. Purpose

2.1 Sabbatical leave may be granted to a faculty member so that he/she may engage in research, writing, or other activity calculated to contribute to professional development and his/her value to West Virginia University.

Section 3. Eligibility

3.1 Any person holding faculty rank is eligible for sabbatical leave after completion of at least six years of full-time employment in a faculty rank. After completing a sabbatical leave, a faculty member shall not be eligible for another sabbatical leave until the seventh subsequent year as a regular member of the faculty. During this period of time a maximum of two regular semesters in either an authorized part-time status or an authorized unpaid leave of absence may be counted toward eligibility for sabbatical leave provided that in the latter instance the leave of absence was for appropriate professional purposes. Separate summer school employment shall not be counted toward eligibility for sabbatical leave.

Section 4. Conditions Governing the Granting of Sabbatical Leave

4.1 The awarding of sabbatical leave is not automatic but shall depend upon the merits of the request and on conditions prevailing at the university at the time. Review of leave applications subsequent to an earlier leave will consider achievement during previous leaves. Sabbatical leave recommendations will be approved by the president’s designee.
Each year the designee will forward information on approved sabbatical leaves to the Board of Governors.

4.2 The applicant for a sabbatical leave will forward the application to the department chair and the dean for review and endorsement. The review shall determine whether the leave will further the professional development of the applicant and whether it is in the best interest of the unit, taking into account the prevailing fiscal circumstances. A fully-approved application will be forwarded to the president’s designee for final approval after determining that equitable procedures and standards have been observed.

Section 5. Compensation

5.1 A faculty member on sabbatical leave shall receive full salary for no more than one-half of the nine-month or twelve-month contract period or half-salary for no more than the full nine-month or twelve-month contract period. The maximum compensation will not exceed one-half of the annual salary regardless of the length of the sabbatical leave.

Section 6. Obligations of the Faculty Member

6.1 An applicant for sabbatical leave shall submit in writing a detailed plan of the activity that he/she proposes to follow. The plan, as approved, will represent the faculty member’s assignment during the sabbatical leave period. The approved plan shall not be modified without the written consent of the president’s designee.

6.2 In accepting a sabbatical leave, a faculty member shall sign a statement indicating that he/she is aware of and agrees to all conditions of the leave as specified therein.

6.3 While on sabbatical leave, a faculty member may not accept remunerative employment without the written consent of the president’s designee. Fellowships, grants, assistantships and similar stipends shall not be considered remunerative employment.

6.4 Upon completion of a sabbatical leave, a faculty member shall file with the president’s designee a written report of his/her scholarly activities while on leave.

6.5 A faculty member is obligated to return for a full contract year of service upon completion of the leave. Failure to return will obligate the faculty member to reimburse in full the institution for salary and benefits received during the period of leave.

Section 7. Obligations of the Institution

7.1 A faculty member’s institutional position, status, and rank shall not be adversely affected solely by his/her assignment while on sabbatical leave.
SABBATICAL LEAVE APPLICATION

[Revised August 2000, re-issued Fall, 2011]
Suggestions for completing Sabbatical Leave Program Application

The following suggestions are based on observations of applications submitted in the last few years. Attention to these matters will help assure that review of a application is not delayed while the information is obtained. If you have questions about items not covered below, call Debbie at x2530.

1. Summary Sheet

Please note that sabbatical leaves are considered once each year, early in the spring semester.

2. Application

A. Detailed answers must be provided for Item 3 (Sabbatical Leave Application for Faculty-Page 2) “Coverage of Duties,” particularly with regard to teaching and advising duties.

B. Detailed information is needed in the responses to Item 5, (Sabbatical Leave Application for Faculty-Page 3) “Leave Activities,” particularly sections a, b, and h. Specific objectives, enough detailed information about your plan, and sufficient detail about the ways in which the institution will benefit from your leave must be provided so that it will be evident you have made careful and reasonable plans for this leave.

3. Agreement Form

One (original) notarized agreement form is needed.

4. Sabbatical Leave Cost Form (to be completed by the Dean's Office)

A. The cost of the salary is the salary that will be paid to the faculty member taking a sabbatical leave while on leave.

B. The cost of replacement instructors is the cost, if any, of hiring persons to perform duties the faculty member would usually perform. A graduate assistant, for example, might be hired to teach one course of three credits at a cost of $500 per credit hour for a total replacement cost of $1,500. Another example would be an adjunct faculty member hired to teach two three-credit hour courses for a replacement cost of $6,000. Using the required formula, this would be six credit hours at the cost of $1,000 per credit hour for a replacement cost of $6,000.

Support for these costs must come from the department and/or college. Funds are not available for this purpose from the Office of the Provost or the Office of the Vice President for Health Sciences.
WEST VIRGINIA UNIVERSITY
Sabbatical Leave Application
(Summary Sheet, p. 1)

Name:___________________________________________Date:___________________

If you have not read the Sabbatical Leave policy, please do so before completing this application. A copy of the policy may be viewed above or at http://bog.wvu.edu/r/download/4207

Submitted for possible participation in:

_______ July through December, OR the fall semester
    -Sabbatical Application due the previous spring semester
      - due Jan. 4: in Chairperson's Office
      - due Jan. 14 in Dean’s Office
      - due Feb. 1 in Provost/Vice President's Office

_______ January through June, OR the spring semester
    -Sabbatical Application due the previous spring semester
      - due Jan. 4: in Chairperson's Office
      - due Jan. 14 in Dean’s Office
      - due Feb. 1 in Provost/Vice President's Office

_______ July through June, OR the full nine-month academic year
    -Sabbatical Application due the previous spring semester:
      - due Jan. 4: in Chairperson's Office
      - due Jan. 14 in Dean’s Office
      - due Feb. 1 in Provost/Vice President's Office

When a deadline falls on an official holiday or weekend, materials will be due by the end of the previous business day.

Title/Position:_____________________________________________________________

Department/Division:________________________________________________________

College/Administrative Unit:___________________________________________________

Recommend approval:

________________________________________________________________________
Chair/Department Head Date

________________________________________________________________________
Budget Officer Date

________________________________________________________________________
Dean/Director Date

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Brief summary of plan of activity/purpose of the Sabbatical Leave:

Brief summary of benefit to the University:
Sabbatical Leave Request
(Summary Sheet Page 3)

In submitting this Sabbatical Leave Application, I have read and agree to the provisions of West Virginia University Board of Governors Policy 3.

___________________________________  ____________________
(Applicant)                             (Date)

The preceding Application for Sabbatical Leave proposes important research or creative scholarly activity which will substantially further the goals of the Department/Division of __________________ and which meets the sabbatical leave requirements of West Virginia University as outlined in Policy 3 and the Faculty Handbook. I recommend that the application be approved.

___________________________________  ____________________
(Department/Division Chair)             (Date)

The preceding Application for Sabbatical Leave proposes important research or creative scholarly activity which will substantially further the goals of the College/School of __________________ and which meets the sabbatical leave requirements of West Virginia University as outlined in Policy 3 and the Faculty Handbook. I recommend that the application be approved.

___________________________________  ____________________
(Dean)                                 (Date)

The preceding Application for Sabbatical leave proposes important research or creative scholarly activity which will substantially further the goals of West Virginia University and which meets the sabbatical leave requirements as outlined in Policy 3 and the Faculty Handbook. I approve the application.

___________________________________  ____________________
(Vice President)                        (Date)
WEST VIRGINIA UNIVERSITY
Sabbatical Leave Cost

This form is to be completed by the Dean's Office and attached to each sabbatical leave request to summarize the costs of that leave to the University. The following information should be used to calculate the cost to the institution of a faculty member's sabbatical leave.

Faculty Member's Name________________________________________________

Cost of salary for ____one semester ____two semesters ____year: $________

Cost of replacement instructors (Replacement instructors $________
would include adjunct or part-time temporary faculty or graduate teaching assistants hired to replace the faculty member on leave. The cost is to be calculated by taking the number of credit hours to be taught and multiplying by the cost per credit hour)

Total Institutional Cost $________

________________________________________  __________ Date

Dean
1. **ELIGIBILITY**

   a) Are you a full-time faculty member? Yes _____; No _____

      If full-time are you Tenured _____; or Tenure Track _____

   b) How long have you held your present position? __________________________

   c) What was the date of your first employment at WVU in a full-time position? __________________________

   d) What was the date of your first employment at WVU, if it differs from the above? __________________________

   e) Have you had a leave of absence without pay or other leave during that time?

      Yes_____ No_______ If yes, please specify type and time period of leave.

2. **SALARY**

   a) What is your current salary? $_________________ per year (Exclude UHA salary)

      9 month contract_____ 12 month contract_____ Other, please specify_______

   b) Given the guidelines of the Sabbatical Leave Program, what salary arrangements do you request?

      Full pay for ___months   Half pay for ___months   Other, please specify_______

   c) What is the source of funding for your salary while participating in the Sabbatical Leave Program?

      State appropriated_____ Grant_____ Contract_____ Fees_____

      Overhead _____ Practice Plan _____ Other, please specify________________
Sabbatical Leave Application for Faculty – Page 2

d) If your salary support will come from a source other than state appropriated funds, please specify in detail on an attachment the funding source. Include documentation indicating the funding source has approved the use of the funds for this purpose or explaining why such approval is not required.

e) Do you have a grant or other financial assistance other than your salary that will help finance your Sabbatical Leave?

   Yes______  No_______

   If so, name the source__________________________________________,

   the period in which the financial assistance will be in effect______________,

   and the amount______________________.

   Is this funding pending_____ or already awarded_____?

   If pending, when you do expect to learn if the funding will be provided?______

f) Are there any other costs associated with your program participation such as the hiring of replacement faculty/staff, travel costs, equipment costs, etc.?

   Yes_____  No_______

   If there are additional costs, please attach a statement identifying the amount and purpose of the expenditure and the funding source for the expenditure. This may need to be developed in consultation with your chair/department head.

3. **COVERAGE OF DUTIES**

   In consultation with your chair/department head, develop and attach a description of the way in which your duties will be covered while you participate in a Sabbatical Leave. Please be specific and indicate the names of persons who will assume your duties, the nature of the duties they will assume, etc. If some of your duties will not be covered, please describe those duties and indicate the consequences of their not being completed.

4. **VITA** - Attach an up-dated vita.
5. **LEAVE ACTIVITIES**

On no more than 4 - 6 attached pages, please describe the following (lettering each section appropriately):

a) The **specific objectives** of your Sabbatical Leave;

b) The **plan for achieving the stated objectives**, including the time schedule of events;

c) Why participation in the Program is **required** if the objectives are to be achieved;

d) Your **qualifications for the proposed task**, including information about your degrees and field of study;

e) What program **participation will accomplish** for you and how the program activities relate to your long-range professional objectives;

f) The **impact** your participation in this program may have on other units on campus;

  g) **Documentation**, where applicable, of an invitation to a research institute, laboratory, or other academic institution or setting;

  h) The ways in which the proposed work will **further the goals of your unit and the University**.

6. **PREVIOUS LEAVE(S)/ PROGRAM PARTICIPATION**

a) Have you previously taken a sabbatical leave or participated in the professional development program at WVU?

    No___ Yes___ If so, respond to the following items.

b) If so, what were the initial and completion dates of the leave(s)/program?

    Sabbatical leave:
    Professional Development Program:

c) Summarize the results of the leave(s), including the ways in which the goals of the University were advanced by the leave(s)/program.

d) List the publications, patents, or other products resulting from the previous sabbatical leave(s)/program.
CHAIRPERSON/DEPARTMENT HEAD COMMENT SHEET

Note: This sheet must be completed by the chairperson/department head and attached to the Application before forwarding to the dean/director.

Applicant: ____________________________________________________________

1. Do you favor a sabbatical leave for this applicant? Why or why not?

2. Do you support the proposal itself? Why or why not?

3. Who would assume the applicant's responsibilities while on leave? Will any responsibilities be unmet?

4. Are there any consequences for other units on campus of another person assuming the applicant's responsibilities or some responsibilities being unmet?

5. Other than the employee's salary and benefits, do you anticipate any other University expenditures associated with the leave if it is granted (e.g., travel, training fees, paid replacement)? Indicate the anticipated item, cost, and the source of funds that would be used.
6. Are there other circumstances that either favor or disfavor the proposal? Please explain.

7. If the person has previously participated in a professional development program or sabbatical leave, please verify and comment on the results of such participation.

8. Should program participation be contingent upon any factors, such as the receipt of grant funding, etc.?

9. Was this request subjected to peer review? Yes_____ No_____
   If yes, please attach a summary of the results of that review.

10. How many other employees in this unit have applied for participation in a professional development program or a sabbatical leave during the time period of this application?___________
    If more than one employee has applied, please attach a priority ranking of the applications.

11. What is this employee's assignment number?___________

__________________________________________
Signature                                      Dat

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DEAN/DIRECTOR COMMENT SHEET

Note: This sheet must be completed by the dean/director and attached to the Application before forwarding to the appropriate vice president.

Applicant: ________________________________________________________________

1. Do you approve a sabbatical leave for this applicant? Why or why not?

2. Do you support the proposal itself? Why or why not?

3. Have you any additional comments on this request for participation in this program?

4. If you do not support this application, are there alternative ways in which the goals could be achieved?

   If more than one employee has applied, please attach a priority ranking of the applications.

Signature ____________________________  Date ______________

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SABBATICAL LEAVE AGREEMENT

This Agreement entered into by and between West Virginia University (hereinafter referred to as "University"), and ___________________________________________.

(Faculty Member)

(hereinafter referred to as "Faculty Member"), pursuant to West Virginia Code 18-26-8d and West Virginia University Board of Governors Policy 3 this ______ day of ____________, ________.

(year)

WITNESSETH:

That for and in consideration of the obligations hereinafter assumed by the Faculty Member, the Board and Institution do covenant and agree to pay to the Faculty Member the salary he/she would have received for one half the contract period had he/she performed his/her regular duties at the Institution. The Faculty Member will receive the equivalent of salary for one half of the contract period whether his/her sabbatical lasts one half the contract period or a full contract period.

FIRST: The Faculty Member shall submit to the president or designee a detailed, written plan of activity which he/she proposes to follow while on sabbatical leave, which plan becomes a part of this Agreement. The plan may be amended at any time in writing, by mutual consent of the Faculty Member and the president or designee.

SECOND: While on sabbatical leave, the Faculty Member may not accept remunerative employment without the written consent of the president or designee. Fellowships, assistantships, or similar institutional stipends shall not be considered remunerative employment.

THIRD: Upon return from sabbatical leave and within sixty (60) days of resuming his/her faculty position, the Faculty Member shall file with the President or designee a written report of his/her scholarly activities while on leave.

FOURTH: Upon completion of sabbatical leave, the Faculty Member shall return to the Institution at which he/she taught prior to commencement of the sabbatical leave for a period of one (1) year and resume his/her duties or any duties assigned by the chairperson of his/her department or dean of his/her school. In the event the Faculty Member does not return to the Institution upon completion of sabbatical leave, he/she will repay the compensation received by him/her during the leave. If he/she returns for a period of less than one (1) year, the repayment shall be prorated accordingly. Should the Faculty Member fail to repay his/her obligation either by service or
monetary repayment, the Institution may take legal actions necessary to recover the outstanding obligation.

**FIFTH:** This Agreement shall become effective on the date specified on page one (1) of this Agreement and shall continue for so long as the Faculty member's obligations to the Institution remain unfulfilled.

**SIXTH:** This Agreement contains all the agreements, conditions, understandings, representations and warranties made between the parties hereto with respect to the subject matter hereof, and may not be modified orally or in any manner other than by an agreement in writing signed by all parties hereto or their respective agents.

__________________________                _________________
Employee Signature                Date

STATE OF WEST VIRGINIA
COUNTY OF ______________________, to wit:

The foregoing person appeared before me this ___ day of ____________________, _____, swore that he/she is the person named herein, and affixed his/her signature to this Agreement; by

___________________________________
Notary Public
My Commission Expires _________________

* * * * * * * * * * * * * * * * *

West Virginia University
Board of Governors on behalf
of James P. Clements, President
West Virginia University by

Michele G. Wheatly
Provost and Vice President
for Academic Affairs                _________________
Date

STATE OF WEST VIRGINIA
COUNTY OF ______________________, to wit:

The foregoing person appeared before me this ___ day of ____________________, _____, swore that he/she is the person named herein, and affixed his/her signature to this Agreement; by

___________________________________
Notary Public
My Commission Expires _________________

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