



MINNESOTA STATE

## Minnesota State College Faculty

# SABBATICAL LEAVE

## APPLICATION PACKET

Dear Faculty Applicant:

A sabbatical leave offers faculty the opportunity to secure additional education, training, or experience which will make them better prepared for carrying out their college responsibilities, and will support the professional development of faculty, the development needs of academic departments or areas, and the planned instructional priorities of the college/system mission. We are pleased that you are seeking a professional development opportunity that will be of benefit to both you and your college.

While you are planning for your sabbatical leave, we encourage you to consult broadly with the administrator to whom you report. It is also recommended that you consult with faculty colleagues. Such consulting should enhance your planning, both as an individual faculty member and as a faculty member of the college.

This packet is designed to assist you with planning for the best possible sabbatical. Please follow the instructions on each of the following materials, and use the Criteria (Guide B) as a checklist to ensure that the proper procedures are followed.

**Form 1.** Faculty Sabbatical Leave: ***Application***

**Form 2.** Faculty Sabbatical Leave: ***Plan***

**Form 3.** Faculty Sabbatical Leave: ***College Review of the Plan***

**Guide A.** Faculty Sabbatical Leave: ***Guidelines for Writing the Plan***

**Guide B.** Faculty Sabbatical Leave: ***Criteria***

Be sure to send completed forms 1-2, and form 3 to the designated authority at your college between ***October 24 and November 15\**** in order to comply with the deadlines specified by the Minnesota State College Faculty (MSCF) Employment Contract. Your college administration will review your sabbatical application and plan; the Minnesota State system office, Human Resources Division will complete the eligibility process, and you will be advised of the decision regarding your application no later than the following January 15.

Sincerely,

***Minnesota State system office  
Human Resources Division***

***\*Note:*** When October 24<sup>th</sup> falls on a weekend, the deadline shall be the Friday before. The November 15<sup>th</sup> deadline shall move forward to the Monday after.

September 2020

\_\_\_\_\_ Date

\_\_\_\_\_ College

**MSCF FACULTY SABBATICAL LEAVE: APPLICATION**  
**Form 1**

**NAME OF APPLICANT** \_\_\_\_\_

I hereby apply for a sabbatical leave as provided in Article 17, Section 4 of the MSCF Employment Contract, *Sabbatical Leave*.

*"The purpose of sabbatical leaves is to give faculty members the opportunity to secure additional education, training, or experience which will make them better prepared for carrying out their college assignments, and will support the professional development of the faculty, the development needs of academic departments or areas, and the planned instructional priorities of the college/system mission."*

My initial date of temporary part-time/full-time, unlimited full-time, or unlimited part-time employment with a Minnesota State community/technical college was: \_\_\_\_\_ Credential field(s) \_\_\_\_\_

I am a former MCCFA / UTCE [*circle one*]

I request the following type of sabbatical leave: [*check the one that applies*]

\_\_\_\_\_ Full academic year                      \_\_\_\_\_ One semester

I request sabbatical leave during the following semester(s): [*indicate semester(s) and year(s)*]

\_\_\_\_\_ Fall semester, 20\_\_\_\_                      \_\_\_\_\_ Spring semester, 20\_\_\_\_

I have served, continuously, the equivalent of six or more full-time academic years at a Minnesota State two-year college with an aggregate of 12 semesters of actual service without having been granted a sabbatical leave. (Any semester in which an employee has received 30 or more days of unpaid leave does not count as one of the 12 semesters, excluding the one semester exception "gift semester" specified in Article 15, Section 1.)                      Yes\_\_\_\_                      No\_\_\_\_

*If the answer is "No," explain why you think you may still qualify for a sabbatical leave.*

I have taken previous sabbatical leaves as follows:                      [*list quarter(s)/semester(s) and year*]

First sabbatical \_\_\_\_\_                      Second sabbatical \_\_\_\_\_  
Third sabbatical \_\_\_\_\_                      Other sabbatical \_\_\_\_\_

I have taken unpaid leave during the following periods: \_\_\_\_\_  
I have taken a "gift quarter/semester" during \_\_\_\_\_

*Signature of Applicant* \_\_\_\_\_                      *Date* \_\_\_\_\_

A replacement can be found for this employee:    Yes\_\_\_\_                      No\_\_\_\_

*Signature of Dean* \_\_\_\_\_                      *Date* \_\_\_\_\_

*Signature of President* \_\_\_\_\_                      *Date* \_\_\_\_\_

\_\_\_\_\_ **Date**

\_\_\_\_\_ **College**

***MSCF FACULTY SABBATICAL LEAVE: PLAN  
Form 2***

Please review the attached Faculty Sabbatical Leave: *Guidelines for Writing the Plan (Guide A) and the Faculty Sabbatical Leave Criteria (Guide B)*. In addition, consult with the administrator to which you report before submitting this plan.

Please type your plan. Use this format flexibly; that is, you need not confine yourself to the space provided. If it helps you, type this form on a computer so the space suits your needs.

**NAME** \_\_\_\_\_ **Credential Field(s)** \_\_\_\_\_

**Assignment at college** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Year and Semester(s) Requested for Sabbatical** \_\_\_\_\_

**Supervising administrator** \_\_\_\_\_  
Print Name Title

**1. WHAT DO YOU PLAN TO ACCOMPLISH WITH YOUR SABBATICAL?**

Please forward your *original copy* of this sabbatical plan, along with the application **Form 1**, to your designee at the college between **October 24<sup>th</sup> and November 15<sup>th</sup>**. Please send copies to your supervising administrator and to your chief human resources officer on or before **November 15<sup>th</sup>**. Retain a copy for your records.

**2. HOW DO YOU ANTICIPATE THAT YOUR SABBATICAL PLAN WILL MAKE YOU A BETTER EDUCATOR? HOW WILL YOUR SABBATICAL PLAN IMPROVE YOUR TEACHING AND STUDENT LEARNING?**

**3. WHAT ACTIVITIES WILL HELP YOU MEET THE ANTICIPATED ACCOMPLISHMENTS OF YOUR SABBATICAL PLAN?**

**4. WHAT IS YOUR ANTICIPATED TIMETABLE FOR ACCOMPLISHING THE ACTIVITIES OF YOUR PLAN?**

**FALL SEMESTER:**

**SPRING SEMESTER:**

**5. WHAT DOCUMENTATION WILL YOU PROVIDE FOR YOUR ACTIVITIES AND THE COMPLETION OF YOUR SABBATICAL PLAN WHEN YOU WRITE YOUR SABBATICAL REPORT?**

This sabbatical plan, which I will complete, will be of mutual benefit to the college and to me. I understand that this plan requires both the recommendation of my supervising administrator and/or CAO, and approval by the college president, and that any significant change in this plan also requires approval of the college president or designee.

**I further understand that *upon return from the sabbatical leave*, I will submit a report to the college president or designee upon my first day of my return, which will document how I have accomplished this plan.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Supervising Administrator (and/or CAO) \_\_\_\_\_ Date \_\_\_\_\_

Signature of President \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_

Date

\_\_\_\_\_ College

***MSCF FACULTY SABBATICAL LEAVE: COLLEGE REVIEW OF THE PLAN  
Form 3***

The Minnesota State College Faculty, Article 17, Section 4, states:

*"The purpose of sabbatical leaves is to give faculty members the opportunity to secure additional education, training, or experience which will make them better prepared for carrying out their college assignments, and will support the professional development of the faculty, the development needs of academic departments or areas, and the planned instructional priorities of the college/system mission."*

Relate your comments (below) to the purpose of sabbatical leaves, to the criteria for sabbatical leaves, and discuss the sabbatical plan with the faculty member prior to attaching this to the plan.

\_\_\_\_\_ This sabbatical plan meets the purpose and criteria for a sabbatical leave, and, therefore, I approve it.

\_\_\_\_\_ This sabbatical plan is approved with the following conditions:

\_\_\_\_\_ This sabbatical plan is not approved.

Signature of Supervising Administrator (and/or CAO) \_\_\_\_\_ Date \_\_\_\_\_

Signature of President \_\_\_\_\_ Date \_\_\_\_\_

## **MSCF FACULTY SABBATICAL LEAVE: GUIDELINES FOR WRITING THE PLAN**

### **Guide A**

#### **RATIONALE FOR THE PLAN**

These guidelines are intended to help you write your sabbatical plan for a creative and productive sabbatical. In addition, your plan helps you to achieve the purpose of sabbatical leaves as stated in the Minnesota State College Faculty Employment Contract, Article 17, Section 4. Sabbatical Leave:

*"The purpose of sabbatical leaves is to give faculty members the opportunity to secure additional education, training, or experience which will make them better prepared for carrying out their college assignments, and will support the professional development of the faculty, the development needs of academic departments or areas, and the planned instructional priorities of the college/system mission."*

#### **GUIDELINES FOR WRITING YOUR PLAN**

These guidelines follow the questions and the format of the *Faculty Sabbatical Leave: Plan (Form 2)* and the examples used throughout assume a sabbatical leave of two semesters.

1. **What do you plan to accomplish with your sabbatical?** State the general purpose of your plan in one sentence. *For example - "The purpose of my sabbatical plan is to improve my teaching by enhancing my classroom use of instructional computing, classroom research, writing across the curriculum, and teaching for thinking."*
2. **How do you anticipate that your sabbatical plan will make you a better educator? How will your sabbatical plan improve your teaching and student learning?** Give a short explanation of how your plan will achieve your above-stated purpose and the purpose of a sabbatical leave as stated in the Minnesota State College Faculty Employment Contract, Article 17, Section 4 (above). This explanation ensures you that your plan meets the demands of the MSCF Employment Contract.
3. **What activities will help you meet the anticipated accomplishments of your sabbatical plan?** These activities make up the most specific details of your plan - the road map of your plan. Obviously, you are planning approximately one year in advance so some of the details may not yet be clear; however, project the activities as best you can. *For example - The following activities will help me accomplish my sabbatical plan:*
  - a. Instructional Computing - I will work with three faculty at my college and two faculty at the College of St. Catherine who use the three types of instructional software which I want to learn [list the software titles]. They have volunteered to assist me and I will help them with their classes.
  - b. Classroom Research - I have arranged an internship with Tom Angelo of Boston College, Boston, Mass. I will assist Tom with both classes and workshops in Classroom Research.
  - c. Instructional Writing and Teaching for Thinking.
    - (1) I will read the following books and articles on instructional writing and on teaching for thinking (list the books).
    - (2) I will attend and help with classes at DeAnza Community College, California, which use writing across the curriculum and teaching for thinking.
  - d. I will return to business and industry at General Electric and receive the enhanced certificate in robotic welders through General Electric Robotics Division.
  - e. I will review the criteria and write a Grant for Purchase of Special Equipment "Aluminum Welder" available from the McKnight Foundation.
4. **What is your anticipated timetable for accomplishing the activities of your plan?** Translate your activities into a timetable. This timetable will help you write a realistic set of activities, because it will show clearly the time limits of your sabbatical. [See *Faculty Sabbatical Leave: Plan (Form 2)* for a timetable format.]
5. **What documentation will you provide for your activities and the completion of your sabbatical plan when you write your sabbatical report?** *For example - I will submit the following documents:*
  - a. Written applications and results of use of instructional software.
  - b. Article on applications of classroom research.
  - c. Rewrites of syllabi for three classes showing integration of writing and thinking.
  - d. I will submit a sabbatical report upon return from sabbatical leave and I will attach the writing which I did during my sabbatical.
  - e. Write a new module to be included in the welding program called robotics welders at my technical college.



***MSCF FACULTY SABBATICAL LEAVE: CRITERIA***  
***Guide B***

After completing your sabbatical application and plan, use these criteria to check it for completeness.

**1. My completed application and plan meet all deadlines.**

The sabbatical application and plan must be received by your college designee between ***October 24th and November 15th*** in the year preceding the academic year during which you are planning to take leave. ***The application and plan must be received by the college designee by November 15th or mailed by certified mail not later than November 15th to be considered.***

**2. Notification of approval or rejection will be provided no later than January 15th.**

**3. All of my application materials are complete:**

**Form 1.** *Faculty Sabbatical Leave: Application*

**Form 2.** *Faculty Sabbatical Leave: Plan*

**Form 3.** *Faculty Sabbatical Leave: College Review of Plan*

**4. My sabbatical plan states clearly how my sabbatical will make me better prepared to carry out my college assignment and/or my credential field.**

**5. All activities in my sabbatical plan are clearly described with names of places, dates of activities, names of courses or workshops, names of key people and a timetable.**

- A. If my plan includes research, I have specified the research plan, its goal, objectives, activities, and expected outcomes.
- B. If my plan consists *entirely* of course work, I have included specific information regarding 8-12 semester credits to be completed per semester. Other planned activities may reduce the number of credits needed for approval. If credits are to be applied to a column change on the salary schedule, grades of pass or satisfactory may jeopardize the average grade of "B" required in the contract. I will consider this when selecting a grade option.
- C. If my plan includes employment, I have specified the employment plan, its goals, objectives, activities, and outcomes. I have given specific information about the place of work and the extent of time.

**6. My sabbatical plan may include scholarships, fellowships, grants, and employment.**

**7. My sabbatical plan states clearly how the plan and each of its parts will be documented upon its completion. Documentation ordinarily includes such materials as official transcripts of grades, copies of research reports, articles submitted for publication, reports of visits to other institutions.**

**8. My president and supervising administrator (and/or CAO) have approved my sabbatical plan and each has signed forms 1-3.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Sabbatical Abstract** College

*Please type:*

Name: \_\_\_\_\_ Credential Field(s) \_\_\_\_\_

Year and Semesters(s) of Sabbatical: \_\_\_\_\_

**1. OBJECTIVES OF MY SABBATICAL:**

**2. RESULTS OF MY SABBATICAL:**

Please send *your original copy* to the college president. Please send copies of your Abstract to your supervising administrator (and/or CAO), and your chief human resources officer. Retain a copy for your records.

\_\_\_\_\_ **Date**

\_\_\_\_\_ **College**

**Sabbatical Report**

This report is to be completed upon return from the sabbatical leave. Please review your **PLAN FOR FACULTY SABBATICAL LEAVE** and consult with your supervising administrator before completing this form. Please type.

**Name:** \_\_\_\_\_ **Credential Field(s):** \_\_\_\_\_

**Year and Semester(s) of Sabbatical:**

\_\_\_\_\_

**Name and Title of Supervising  
Administrator:** \_\_\_\_\_

**1. PURPOSE OF MY SABBATICAL PLAN:**

**2. ACCOMPLISHED OBJECTIVES OF MY SABBATICAL PLAN:**

*(Sabbatical Report, continued)*

**3. ACTIVITIES OF MY SABBATICAL PLAN:**

**4. RESULTS OF MY SABBATICAL PLAN:**

*(Sabbatical Report, continued)*

**5. DOCUMENTATION OF MY SABBATICAL PLAN:**

List documents in order of attachment.

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Signature of Faculty Member

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Date

*(Sabbatical Report, continued)*

**COLLEGE RECOMMENDATION:**

Please relate your comments (below) to the purpose of sabbatical leaves, to the criteria for sabbatical leaves, and discuss the faculty member's sabbatical report with the faculty member.

\_\_\_\_\_ This report is satisfactory for the following reasons:

\_\_\_\_\_ This report is satisfactory with the following conditions:

\_\_\_\_\_ This report is not satisfactory for the following reasons:

\_\_\_\_\_  
*Signature of Supervising Administrator (and/or CAO)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Signature of President*

\_\_\_\_\_  
*Date*

Please send ***your original copy*** to the college president. Please send copies of your Sabbatical Report to your supervising administrator and to your chief human resources officer. Retain a copy for your records.