

# Sabbatical Leave Request Form For MSUAASF Employees

## MINNESOTA STATE UNIVERSITY MOORHEAD

Per Article 15, Section C of the MSUAASF Agreement: The President may grant a sabbatical leave to any ASF Member who proposes to undertake additional study or other endeavors that will enhance the ASF Member's contribution to the university. In order to be eligible for sabbatical leave, an ASF Member must have completed at least six (6) consecutive years of service of at least half (0.50) time for at least nine (9) months within each appointment year at the university since the ASF Member's initial date of employment or the expiration of such ASF Member's last previous sabbatical leave.

Employee Name:

Date:

Department:

Have you had a prior sabbatical leave?      Yes      No

If yes, enter the begin / end dates and purpose of each leave below:

Begin Date:      End Date:      Purpose:

Begin Date:      End Date:      Purpose:

### Request for Sabbatical Leave:

Per Article 15, Section C, Subd. 3, The ASF Member's application for sabbatical leave shall include a written plan consistent with the purposes outlined in Subd. 1 with the dates of the requested leave. Subd. 1 states that the President may grant a sabbatical leave to any ASF Member who proposes to undertake additional study or other endeavors that will enhance the ASF Member's contribution to the university.

Start Date (MM/DD/YY): \_\_\_\_\_

End Date (MM/DD/YY): \_\_\_\_\_

Brief Purpose of Sabbatical Leave: (include your written plan for purposes of sabbatical with this request form)

Length of Sabbatical Leave (select one):

Four (4) months at full base salary

Number of months \_\_\_\_\_ (up to twelve (12)) at two-thirds (2/3) base salary

Twelve (12) months at 90% base salary (second sabbaticals only)

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Office of Human Resources

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### Acknowledgements:

1. If this procedure is ever in conflict with the collective bargaining agreement concerning sabbatical leave, the collective bargaining agreement will rule.
2. Submission Timeline:
  - A Sabbatical Leave Agreement must be submitted to the President's office, with the appropriate Vice President approval, by December 31 prior to the calendar year the leave will commence. However, the request must be made no later than four (4) months prior to the commencement of the above. In an instance of unusual circumstances, the President may, at his discretion, accept a sabbatical leave request at any time.
  - Notification of approval or denial for sabbatical will be communicated in writing.
3. The ASF member should state the purpose for which the leave is requested and the contribution this leave will make in terms of enhancing the effectiveness and contributions to the university. An ASF member MAY include areas such as: performance of assigned duties, honors, participation in learned and/or professional societies, scholarly activities and professional advancement. If applicable, discuss or list your contributions in other areas other than your primary assignment. List these contributions under separate headings as follows: department, area Vice President, University, other areas.
4. The ASF Member shall agree in writing to return to the university for at least (1) year of service after completion of the sabbatical leave. If a decision is made not to return to the University:
  - No salary payments will be disbursed from the date of the notification.
  - The salary money received during the sabbatical leave will become due and payable to the State of Minnesota within one year from the date notification is given not to return.
5. Service faculty members on sabbatical leave may accept scholarships, fellowships, grants, or employment during the leave, consistent with the plan of such leave.
6. A sabbatical leave report must be filed within 30 days following return to campus. This report shall include, but not be restricted to the following items:
  - A summary of what you accomplished during the sabbatical leave.
  - A description of how the accomplishment related to your written plan.

Employee Signature:	Date:
Supervisor Signature:	Date:
Vice President Signature:	Date:

Original to Human Resources   Copy to Employee   Copy to Supervisor   Copy to Vice President   Copy to MSUAASF