



### ***Sabbatical Plan / Report Approval Form***

Faculty Member's Name: \_\_\_\_\_

This pertains to the faculty member's:      *Sabbatical Plan*                      *Sabbatical Report*

If *Plan*, indicate the *proposed* sabbatical term(s) \_\_\_\_\_

If *Report*, indicate the sabbatical term(s) *taken* \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved

Not Approved

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