

**SOUTHERN WEST VIRGINIA COMMUNITY AND TECHNICAL COLLEGE  
BOARD OF GOVERNORS  
SCP-2810.A  
SABBATICAL LEAVE REQUEST**

1. Name: \_\_\_\_\_
2. Dates of continuous full-time employment as a faculty member:  
From: \_\_\_\_\_ To: \_\_\_\_\_ Total years \_\_\_\_\_
3. Dates of last sabbatical leave:  
From: \_\_\_\_\_ To: \_\_\_\_\_
4. Dates requested for sabbatical leave:  
From: \_\_\_\_\_ To: \_\_\_\_\_

My signature below indicates that I have read and agree to all conditions, provisions, and requirements of SCP-2810, *Sabbatical Leave For Full-time Faculty*. I agree to file a written report with the Vice President for Academic Affairs of my activities and accomplishments during the sabbatical leave within 30 days of my return to work.

Attachments:

- Proposal
- Current Vitae

Per attached letter, I recommend approval of this leave.  Yes  No

Per attached letter, I recommend approval of this leave.  Yes  No

Approved  Denied

Faculty Member's Signature	Date
Division Head's Signature	Date
Vice President for Academic Affairs' Signature	Date
President's Signature	Date