



Name \_\_\_\_\_

Department \_\_\_\_\_

Years of Service \_\_\_\_\_

- Employment Status:     **Tenured** Counselor/Instructional Faculty/Librarian
- Probationary** Counselor/Instructional Faculty/Librarian
- Lecturer** Full-Time\*

Period of leave requested:

- \_\_\_\_\_ Fall 2019 Semester
- \_\_\_\_\_ Spring 2020 Semester
- \_\_\_\_\_ 2019-2020 Academic Year

Project Title:

\_\_\_\_\_

1. Attach a statement indicating the detailed plan of study, research, travel or service you propose to perform during the leave period, as well as a justification of the proposed program.
2. Attach a current professional resume.
3. Have you been granted a Sabbatical/Difference-in-Pay Leave before?      Academic Year \_\_\_\_\_  
     If yes, attach most recent sabbatical/difference-in-pay leave report.

\*Prior to the award of a Sabbatical or Difference-in-Pay Leave to a lecturer, there must be a commitment by the College that he/she will be offered subsequent appointment to the University in order to fulfill the leave return service obligation.

In accepting a Difference-in-Pay Leave, I agree to the following:

1. I agree to render service to CSULB upon return from leave at the rate of one (1) term of full time service for each term of leave.
2. I agree to file a suitable bond or an accepted statement of assets (**not including PERS holdings**) and/or a promissory note that is individually or collectively at least equal to the amount of salary paid during the leave.
3. Except as may be expressly authorized in writing by the President or designee, I agree: a) not to accept additional and/or outside employment during the leave period; b) not to engage in teaching; and c) not to engage in department, college, or university service.
4. I agree to submit a detailed report of my Difference-in-Pay Leave within ninety (90) days after my return to service.

\_\_\_\_\_  
Date

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

The granting of the Difference-in-Pay Leave to this applicant for the period(s) noted on this application (will) (will not) disrupt the continued and regular course offerings or affect the quality level of education offered to the students enrolled in this department/program, provided that the number of full-time faculty or librarian employees on leave from this department without replacement does not exceed \_\_\_\_\_ at any time.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Department Chair

Recommendations of the Departmental Leave Committee:

Difference-in-Pay Leave:      Grant      Deny

If recommendation is to deny, please provide statement of reasons (use additional page if necessary):

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Departmental Leave Committee Chair

Recommendation by the College Dean:

Difference-in-Pay Leave:      Grant      Deny

If recommendation(s) is to deny, please provide statement of reasons (use additional page if necessary):

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of College Dean