

SABBATICAL LEAVE REPORT
University of Oklahoma, Norman Campus

All three sections of this report form must be completed. This report is due to the Senior Vice President and Provost within two months of returning to University service.

Please submitted the report form to facultyaffairs@ou.edu.

This report will be used in consideration for merit raises and post-tenure reviews in subsequent years.

Name:

Academic Unit:

Sabbatical Dates:

Date of this Report:

1. Describe the location and nature of your sabbatical.

2. Describe and provide the rationale for any deviations from the proposed activities described in your application for sabbatical.

3. Describe how your sabbatical has contributed to department/school, university and personal/professional enhancement in terms of (a) teaching, (b) research/creative activity, and (c) service (to your discipline, to the university, and/or to the public).

A. Contributions to Teaching:

B. Contributions to Research/Creative Activity

C. Contributions to Service:

SABBATICAL LEAVE REPORT
Approvals
University of Oklahoma, Norman Campus

Faculty Signature

Date

Please indicate your acceptance/non-acceptance of this report. If marked not acceptable, please provide a rationale for your decision.

Acceptable

Not Acceptable

Department Chair Signature

Date

Acceptable

Not Acceptable

Dean Signature

Date

Acceptable

Not Acceptable

Provost Signature

Date