



SABBATICAL LEAVE REPORT – Part B

Instructions: Attach this signed form (Part B) to the sabbatical leave report provided by the faculty member (Part A). This form is to be completed by the Chair/equivalent and the Dean.

Faculty Member Name: _____

Department/School: _____

College/School: _____

Semester(s) or Dates of Sabbatical Leave: _____

Title of Sabbatical Project: _____

Report of assessment of the adequacy of the final report of sabbatical leave:

- ___ Adequate documentation on fulfilling the work outlined in the sabbatical proposal or as amended.
___ Adequate documentation of progress made on fulfilling the work outlined in the sabbatical proposal or as amended
___ Inadequate documentation on fulfilling the work outlined in the sabbatical proposal or as amended.

Please explain your selection, including attempts to solicit additional documentation:

Multiple horizontal lines for text entry.

Department Chair/Equivalent's Name Signature Date

Comment on the review above:

Multiple horizontal lines for text entry.

Dean Name Signature Date

*Share the completed form with the faculty member and allow 14 days for rebuttal before forwarding to the Provost