Application for Leave should be made to the Dean, but through your Chair/Director. Each application should include this form, a letter of recommendation from the Chair/Director, and additional documentation as indicated below. This form should be completed electronically, and then printed for your signature. Yellow sections indicate information/documentation to be provided–enter data only in these sections. All applications will be reviewed by the Leaves Committee.

Applications must be received by the Dean’s Office by **October 31** of the academic year prior to the requested Leave. Incomplete applications will be sent back to the faculty member and/or Chair/Director before being considered.

**PART A: To Be Completed by the Faculty Member**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: | Click here to enter text. | | Rank: | Choose an item. |
|  | | | | |
| Department/School: | | Choose an item. | | |

Research Leave is granted only when three conditions are met:

1. The number of years of service completed prior to the Leave must adhere to the *Policy*.
2. A satisfactory record of scholarly achievement and/or service to the University since the beginning of the previous Leave, or the beginning of employment at McMaster in the case of a first leave.
3. A submission of a satisfactory plan describing the research objectives and the way they will be achieved during the proposed Leave.

**Section 1: Leave Type and Related Information**

Please place an “X” beside the type of Leave for which you are applying:

|  |  |  |  |
| --- | --- | --- | --- |
| **“X”** 🡻 | ***Length of Leave*** | ***Salary Percentage*** | ***Comments*** |
| **Tenured Appointments** *(see Supplementary Policy Statement C1)* | | | |
|  | 12 months | 100% | * Once only for first Leave after 6 years of full-time service and tenure |
|  | 12 months | 90% | * Subsequent to a Leave and after 6 years of full-time service |
|  | 6 months | 100% | * Subsequent to a Leave and after 6 years of full-time service |
|  | 6 months | 90% | * Subsequent to a Leave and after 3 years of full-time service. Eligible to apply for two six-month Leaves (separate applications required) in a 7 year period (first Leave in either half of fourth year; second Leave in either half of the seventh year). |
| **Permanent Teaching Appointments** *(See Supplementary Policy Statement C2)* | | | |
|  | 4 months | 100% | * Once only for first Leave after 6 years of full-time service and permanence |
|  | 4 months | 90% | * Subsequent to a Leave and after 6 years of full-time service |
| **Administrative Appointments** *(see Administrative Leave Policy)* | | | |
|  | 12 months | 100% | * Leave for Administrative Appointments (completion of 5 yrs. service) |

|  |  |
| --- | --- |
| Start Date of Proposed Leave\*: | Choose an item. |
| \* A 12-month Leave will normally begin July 1st; a 6-month Leave on July 1st or January 1st; a 4-month Leave on September 1st, January 1st, or May 1st. | |
|  | |
| Date and Duration of Previous Leave: | Click here to enter text. |
|  | |
| Leave credit (if applicable): | Click here to enter text. |

**Section 2: Record of Scholarly Achievement and Service**

* Please attach a current *curriculum vitae* as part of this application.

**Section 3: Preparation and Planning**

* Please attach a one-page description of the proposed program of research to be undertaken during your proposed Leave.

In preparation for your Leave, please specify what arrangements have been made to cover/manage your…

|  |  |
| --- | --- |
| a) Teaching Responsibilities | |
|  | Click here to enter text. |
|  | |
| b) Supervision of Graduate Students [you **must** identify the faculty member(s) who will be responsible for your graduate student(s) during your Leave, regardless of the amount of time away from the University, if any, or how you plan to keep in contact with your student(s)] | |
|  | Click here to enter text. |
|  | |
| c) Administrative Duties | |
|  | Click here to enter text. |
|  | |
| d) Research Program | |
|  | Click here to enter text. |

**Section 4: Leave Location**

|  |  |
| --- | --- |
|  | “Yes” / “No” **🡻** |
|  |  |
| Will you be working at another University or other research location as part of your Leave? | Choose an item. |
| If **Yes**, please attach letter(s) of invitation from the host institution(s) and include details in your one-page description (s. 3). | |
|  | |
| Will any part of your Leave take place outside of Ontario? | Choose an item. |
| If **Yes**, an application for an extension of medical insurance coverage will need to be completed with HRS, if Leave approved. | |

**Section 5: Consulting**

“A faculty member on Research Leave may accept fellowships, honorary visiting professorships, or the like, provided that the duties associated with these do not detract from the research plan described in the application for Leave. The Joint Committee agrees that this *Policy* permits members of faculty on Research Leave to engage in consulting activities comparable in extent to those permitted during non-Leave periods. The University’s *Consulting Policy* applies during Leaves, hence the faculty member must report to the Dean of the Faculty any consulting or teaching carried out during the Leave. Anticipated employment income in excess of 115% of regular salary must be approved by the Dean before taking up the employment.”

|  |  |
| --- | --- |
|  | “Yes” / “No” **🡻** |
|  | |
| Are you planning to teach or consult during your Leave? | Choose an item. |
| If **Yes**, do you anticipate receiving employment income in addition to your base salary? | Choose an item. |
| If **Yes**, will your anticipated employment income exceed 115% of regular salary? | Choose an item. |
|  | |
| * Please attach an explanation of the congruency of your work plans with your research plans. | |

**Section 6: Agreement**

I agree to return to McMaster University at the end of the Leave and, within four months of my return, I will provide a written report on my accomplishments during the Leave to my Chair/Director and to the Dean.

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  | Click here to enter a date. |
| *Signature* |  |  | *Date* |

|  |  |  |
| --- | --- | --- |
| **Checklist:** | 🗹 All sections (1-6) of Part A completed | 🗹 Current C.V. attached (s. 2) |
| 🗹 Description of proposed program of research during Leave (s. 3) | 🗹 Explanation of congruency of work/research plans, if appl. (s. 5) |

🡺**Once complete, forward the full Application to your Chair/Director for review and endorsement🡸**

**PART B: To Be Completed by Department Chair/School Director *(Not Applicable for Admin. Leaves)***

Please include a letter of recommendation for this faculty member’s proposed Leave.

I endorse this Application for Leave.

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| *Signature* |  |  | *Date* |

🡺**Once complete, forward the full Application and your recommendation letter to the Dean’s Office🡸**

**PART C: To Be Completed by the Dean’s Office**

**Completeness/Eligibility/Timing Review:** 🞎 OK 🞎 See Below… Administrator: \_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| *Notes:* |  |
|  |  |
|  |  |

**Leaves Committee:** Approval Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Committee Comments: 🞎 No 🞎 Yes…

|  |  |
| --- | --- |
| *Comments:* |  |
|  |  |
|  |  |

**Approval Letter Sent:** Tentative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Final: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Revised: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Leave Report:** Due Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rec’d: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dean’s Letter: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ATS Update:** Initial Entry Upon Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Report Submission Field: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_