

Faculty Professional Development  
Leave of Absence Grant Application Form

Name:  Date:

Home address:  Home Phone:

City:  Zip:

Division:  Dept.  LBCC Ext.:

Years contracted faculty at LBCC:

Term(s) and year(s) of leave requested  Percent of Leave (1/2, full, etc.)

Prior Leave of Absence granted and for what purpose?

Dates of prior Leave:

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In an attached narrative statement, address the following:

Goals and Objectives

1. Clearly state the goals and objectives you plan to achieve by this leave - narrative description
2. Describe the activities you plan to accomplish your goals. Include a tentative timeline for achieving major goals for each term requested.

Address the following:

1. Discuss the proposal's value to yourself, you department and the college
2. Discuss the relationship of your proposal to your previous experience and/or your background
3. If appropriate, describe the proposal's collaborative components with other faculty, program representatives, mentors, etc.
4. If linked to a prior leave of absence, discuss how this proposal has additional value and how it is tied to your prior leave in terms of both goals/objectives and specific activities.

Sharing your experience:

1. Discuss how you will implement the results of your leave into your role at LBCC.
2. Discuss your proposal for sharing your leave experience with the college. Discuss plans for presentations, workshops, shared curriculum, etc. as appropriate.

Check here: My supervisor has received a copy of this application.

As per Article 20 of the Agreement between Linn-Benton Community College and Linn-Benton Community College Faculty Association, I agree to return to service to the College for an amount of time equal to twice the length of the leave. Otherwise, all funds I receive under the leave must be repaid in full.

Date

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Signature of Applicant (Required)