

Division of the Social Sciences Application for Faculty Research Leave

Faculty Information:

Full Name: _____

Department(s) and Rank: _____

Email address: _____

Research Leave Details:

Academic Year of Proposed Research Leave: _____

Proposed Out-of-Residence Quarters: _____

Are you applying for fellowship funding for a third quarter out-of-residence? If so, please list potential funding sources:

NB: Please consult with the SSD Senior Associate Director for Research Development, June Hou (june@uchicago.edu), for assistance in identifying opportunities.

Confirmation of Eligibility:

When was your last Research Leave from the University of Chicago? _____

When were you last out-of-residence and for what reason(s)? _____

Research Plan and CV: Please attach a current CV and include a statement detailing how you will spend your time while on Research Leave. Include a brief statement about the scholarly results of your last Research Leave (omit if this is your first application).

Plan for Students: Please include a statement detailing your plan for addressing the advising and examination needs of the graduate students in your program, including but not limited to your own advisees. (For example: Has another faculty member agreed to step in? How will you continue to advise students, set and grade examinations, and read dissertation chapters? How will you remain in email contact with your students?)

Signature of Chair(s): By signing below, the Chairs of each of the applicant's Departments or Committees certify that **(a) the Research Leave is merited and (b) the applicant's teaching, graduate student supervision, and administrative duties will be covered if the Research Leave is granted.** If multiple faculty members are applying for simultaneous Research Leaves, the Chair should attach a brief statement detailing the Department's plans for operating with a reduced faculty body. Please choose one or both options below.

____ 2 Quarter Leave Approval

____ 3 Quarter Leave with Funding Approval

Chair of Primary Department

Date

Chair of Secondary Department/Committee (if applicable)

Date