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

Name:						
Ac	Academic Unit:					
Sa	bbatical 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:				
В.	Contributions to Research/Creative Activity				
C.	Contributions to Service:				

SABBATICAL LEAVE REPORT Approvals University of Oklahoma, Norman Campus

	Faculty Signate	ure Date	
	r acceptance/non-accepta ionale for your decision.	ance of this report. If marked not	acceptable,
Acceptable	Not Acceptable	Department Chair Signature	Date
Acceptable	Not Acceptable	Dean Signature	Date
Acceptable	Not Acceptable	Provost Signature	Date