

## Request to Defer Sabbatical Leave

Please review the Sabbatical Leave Policy and complete the form below. Please submit the form via email to Erin McNamara Horvat, Senior Vice Provost ([emh@drexel.edu](mailto:emh@drexel.edu)) with a cc to [facultyaffairs@drexel.edu](mailto:facultyaffairs@drexel.edu). If you have questions or concerns, please contact either Erin McNamara Horvat.

Name:

Date:

College:

Department:

INDICATE CURRENT SABBATICAL ELIGIBILITY:

\_\_\_ Fall/Winter 20\_\_\_      \_\_\_ Winter/Spring 20\_\_\_

\_\_\_ Full 20\_\_\_ - \_\_\_ AY      \_\_\_ Other: \_\_\_\_\_

PROPOSED NEW SABBATICAL DATE: \_\_\_\_\_

In the space below please provide the rationale for your request.  
(Suggested Maximum of 800 words)

Approved sabbatical leaves may be deferred up to one academic year without submitting a new application. Any deferral requests beyond the approved one-year period will be denied, and the faculty member will need to re-apply for a sabbatical leave of absence.\*Special accommodations for a second or third year of deferral due to COVID are possible. If you have questions, please contact Faculty Advancement.

Approved by:

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Department Chair

\_\_\_\_\_

Date

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Dean

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Date