

Sabbatical Leave Application

This application should be submitted to the Superintendent of Schools between September 1st and December 1st during the year preceding the requested sabbatical.

Applicants will be notified of the selection process results by Friday, February 16, 2018.

Name: Date of this Application: [Click here to enter a date.](#)

Duration of Leave: [Choose a Duration](#) Define dates if "other:"

Building(s) in which you work: [Choose a School](#) and [Choose a School](#)

Years of experience in the district (must be a minimum of seven):

Area(s) of certification:

If you have participated in a Sabbatical before, please specify the date(s):

Please use as much space as you need while completing the remainder of this form

1. What specific group of RCS students will be positively affected by your sabbatical experience?
2. What is the specific RCS issue or issues that you will try to address through your sabbatical experience?
3. What RCS data exists to substantiate the issue(s) or concern(s) that you will investigate during your sabbatical?
4. What will be produced through the scope of your sabbatical work?
5. How will your newly acquired knowledge be applied and shared upon your return? Will it incur any expenses for the district?
6. If any, which district programs, personnel or resources already exist to support your topic of investigation?
7. Describe how your proposed area of investigation is endorsed/supported by the New York State Education Department or other such sanctioned organization as an accepted programmatic/academic/social/researched-based intervention for our student population?

Note: You will be expected to report your progress to the superintendent every 10 weeks during your sabbatical. The method of reporting will be dependent on the nature of your sabbatical work and will be mutually agreed upon by you and the superintendent upon acceptance of your sabbatical application.

Office Use Only

| | Yes | No | Rate from 1-10 the impact that this sabbatical will have on the students and programs within the RCS community. <i>1 = Low impact and/or applicability for our entire school and program</i> <i>10 = Of crucial impact and/or applicability for our entire school and program</i> |
|--|-----|----|---|
| The application was on time. | | | |
| The application is complete. | | | |
| The student population is clearly identified. | | | |
| The sabbatical work is relevant to field of certification. | | | |
| The specific research topic is relevant to a clearly identified RCS issue. | | | = |
| The data presented is relevant to the clearly identified RCS issue. | | | = |
| The product of the sabbatical will be relevant to the clearly identified RCS issue. | | | = |
| The proposed application and sharing of acquired knowledge will be relevant to the clearly identified RCS issue. | | | = |
| The candidate will be exploring a topic that is imperative for RCS as there are currently no other systems of support for this need. | | | = |
| The topic of investigation is in alignment with current educational research and is clearly endorsed/supported by NYSED or other sanctioning body. | | | = |
| The sabbatical work will significantly benefit the students and the district. | | | = |

Total out of 70 =

| | Yes | No |
|---|-----|----|
| Further information is needed as noted in the area to the right | | |

| | | |
|----------|--|--|
| Approved | | |
|----------|--|--|

Comments: _____

Signature _____ Date _____

Date that notification was sent to applicant and union _____

