



If "Yes," list the terms and years of the last Sabbatical Leave of Absence taken.

Semester: _____	Academic Year: _____	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Semester: _____	Academic Year: _____	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid
Semester: _____	Academic Year: _____	<input type="checkbox"/> Paid	<input type="checkbox"/> Unpaid

Since your initial employment by the District, or date of completion of the last Sabbatical Leave of Absence taken, whichever is later.

(a) Have you taken authorized Leaves of Absence Without Pay?

Yes       No      If "Yes," list the beginning and ending dates of all such leaves.

From: \_\_\_\_\_ To: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

(b) Have you resigned from District employment and then been rehired by the District?

Yes       No      If "Yes," list the beginning and ending dates for all such periods of absence.

From: \_\_\_\_\_ To: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

(c) Have you provided any District service outside of the bargaining unit, such as Division Dean, other management positions, or a classified position?

Yes       No      If "Yes," give the position and dates:

Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

(d) If you are planning to augment your sabbatical salary with your banked Workload, please be aware that you will need to attach the Workload Banking: Augment Sabbatical Salary form to your application for Sabbatical Leave of Absence. [Appendix B]

I certify to the best of my knowledge that the information provided in this Letter of Intent is true, accurate, and complete.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

**\*Should this date fall on a holiday, Saturday, or Sunday, the following instructional day shall be the due date.**