



CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT

Workload Banking: Augment Sabbatical Salary

Article 12-1A.



NOTE: Article 12-1A.4g of the Contract states that this shall be submitted with the original Sabbatical Leave of Absence Application by September 15th of each Calendar Year.

(Please Print)

TO: Vice President of Academic Services

FROM: _____ W#: _____

(Please Print Name)

DATE:

SUBJECT: Request to Use Earned Bank Load to Increase Salary on Sabbatical Leave

In order to be compensated at full salary for an Academic Year Sabbatical Leave (Fall through Spring Semester), a Faculty member must have banked nine (9) CAHs equivalent units of earned Banked Load. [Article 12-1A.4g.]

For a one (1) semester sabbatical leave an Instructional and Counseling Faculty may use three (3) CAHs equivalent units of earned Banked Load and be compensated at full salary. A Library or Special Assignments Faculty may use one and a half (1.5) CAHs equivalent units of earned Banked Load and be compensated at full salary for a one (1) semester Sabbatical Leave of Absence. [Article 12-1A.4g.]

A faculty member taking a Sabbatical Leave of Absence has until the end of the Term preceding the leave to complete the required load banking. [Article 12.1A.4-1g.]

COMPLETE THE FOLLOWING:

A. I am applying for a Sabbatical Leave of Absence for:

- 1. One (1) semester Leave: _____ (Indicate semester/year)
2. One (1) continuous year Leave: _____ (Indicate academic year)
3. One (1) year split Leave: _____ (Indicate semester and years)

B. Indicate the number of CAHs equivalent units of earned Load you have currently Workload Banked (do not include units in progress): _____.

C. Indicate, if applicable, the number of additional CAHs equivalent units of Load you plan on workload banking before your Sabbatical Leave: Fall _____ Spring _____ Summer _____

D. I request to use the following number CAH equivalent units of workload to be earned and banked by the end of the Term preceding applied to my Sabbatical Leave of Absence in order to increase my salary:

- 1. One (1) semester Leave; or Fall ___ Spr ___ Yr ___
2. One (1) continuous Academic Year Leave; or Fall ___ Spr ___ Yr ___
3. One (1) aggregate year split within two (2) Academic Years. Fall ___ Yr ___ Fall ___ Spr ___ Yr ___

Signature: _____ Date: ___/___/___

(Faculty Signature)

Approved Disapproved

Division Dean/Administrator Signature: _____ Date: ____/____/____

FOR OFFICE USE ONLY

Verified By: _____ Date: ____/____/____
(Vice President of Academic Services)

Original signed copy to be attached to Sabbatical Leave of Absence Application that will be provided to Human Resources.

cc: Division Dean
 Vice President of Academic Services
 Faculty Applicant

Reference: Article 12-1A.4g- Faculty Collective Bargaining Agreement