

Carnegie Mellon

APPLICATION FOR TENURE-TRACK FACULTY PUBLIC SERVICE LEAVE

INSTRUCTIONS

1. The Faculty Member must complete sections I through V and submit the completed form to Department Head for initial review and approval.
2. The Department Head will review the application with the Dean
3. The Dean and Department Head will complete Section VI and submit the entire application to the Provost's Office for consideration.

SUMMARY OF PUBLIC SERVICE LEAVE

Approval of an application for a public service leave is *subject to the discretion of the department head, the dean of the college, and the provost based upon a variety of factors, including the merits of the project to be undertaken by the faculty member and the resources of the department, college, and University.* Faculty members without indefinite tenure may also request that the period of leave be excluded from the term of the academic appointment, subject to approval by the dean and department head.

Generally, professional leave supported by outside funds is granted for a two year period (or less). Faculty members may request a two year extension (for a total of four years of leave). Extensions beyond four years require exceptional justification and explicit consideration and approval by the president.

Faculty members are encouraged to review the Policy on Faculty Leaves as well as the exclusions from service section of the Appointment and Tenure Policy for details concerning the terms and conditions of the leave of absence. Faculty may also wish to review the Summary of Benefits Eligibility During Faculty Leaves available on the Provost's Office website.

- Policy on Faculty Leaves – <http://www.cmu.edu/policies/documents/FacLeaves.html>
- Appointment and Tenure Policy – <http://www.cmu.edu/policies/documents/Tenure.html#exclusions>
- Summary of Benefits Eligibility During Faculty Leaves – http://www.cmu.edu/hr/benefits/benefit_programs/forms/faculty-leaves-benefits.pdf

Questions concerning the benefits available to faculty on leave should be directed to the Leaves Manager, Jan Provenzano at extension 8-5072 or janp@andrew.cmu.edu.

SECTION I: FACULTY PROFILE

Name: _____

Department Name: _____

Faculty Rank (Assistant, Associate, or Full Professor): _____

- With Tenure Without Tenure

Do you wish to request that the period of your leave be excluded from your current service for the purpose of determining your tenure clock, and/or that your reappointment/promotion deadline be delayed for a period equal to the duration of your leave? Such requests are subject to agreement of your Department Head and Dean, and any agreement in this regard must be in writing.

- Yes No

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SECTION II: LENGTH AND TYPE OF LEAVE

Period of Requested Leave:

- Fall Semester of 20__ Spring Semester of 20__
 Full Academic Year 20__-20__ Other (specify below)

Provide the desired start and end dates of the leave:

Start Date _____ End Date _____

Dates and types of previous leaves:

- University Supported Leave: _____
- Other Leaves: _____

SECTION III: FINANCIAL SUPPORT

Requested Benefits from CMU:

- No Benefits – the host institution will provide benefits.
 Full-Time Benefits

Sources of Outside Support:

Specify source(s) of support other than the University _____

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SECTION IV: PROJECT DESCRIPTION

Please attach a detailed description of the public service that you wish to undertake. Include the following:

1. Description of the public service.
2. Where it is to be done.
3. What you consider to be the value of the proposed work to Carnegie Mellon, to yourself, to your professional field, and to the public.
4. Provide a brief (one or two sentence) description of the leave, which may be used for internal purposes.

SECTION V: SIGNATURE

Faculty Member Signature

Date

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SECTION VI:

College & Department Approval

The above referenced department and college are supportive of Professor _____'s request for a leave of absence as described in the attached application.

Will the applicant's tenure decision and/or reappointment/promotion deadlines be delayed?¹ Yes No

If yes, please explain any agreed upon delays: _____

Department Head's Signature Date

Dean's Signature Date

College / Department Administrative Contact

Please provide the name and contact information for the college or department administrator who will work with the Benefits Office and Human Resources concerning the administrative details of the leave, such as identifying the appropriate Oracle Charge String for the benefits fringe rate (if applicable).

Name & Title Email Address Phone Number

Provost's Approval

Mark S. Kamlet Date
Provost and Executive Vice President

Upon approval, please send a copy of this form to the ALG for the above referenced department or college and to:

Attention: Leaves Manager
Human Resources – Benefits Office, 319 South Craig Street

¹ Please see the Policy on Public Service Leave - <http://www.cmu.edu/policies/documents/PublicLeaves.html> - for conditions and limitations regarding delay of tenure decision and reappointment/promotion deadlines.