



## Academic Professional Development Leave Plan Application

To be completed by faculty who are seeking a leave of absence for P.D. purposes under Article 20.

Before completing this application, you are encouraged to read the "Professional Development Leave" section of the Academic Collective Agreement (Article 20).

Name: \_\_\_\_\_ Department: \_\_\_\_\_

Plans must be submitted in accordance with the academic calendar: Start date: \_\_\_\_\_ End date: \_\_\_\_\_

1. Provide a brief description of your project.

2. List the courses/activities and dates of the project outlined in #1.

<u>Activity/Courses</u>	<u>Timeframe</u>	<u>Cost</u>	Approved by CESC (if applicable)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
	<b><u>TOTAL</u></b>	_____	_____
			On behalf of CESC
			_____
			Date: _____

<b>3. List the benefits of your project and specific plans for application and dissemination of knowledge and skills gained through this professional development activity in relation to:</b> <u>(a) The students:</u>  <u>(b) The department:</u>  <u>(c) The College:</u>  <u>(d) The local community:</u>	
<b>4. Have you applied for a P.D. Leave previously?      Was it approved?</b>  <b>Date of last P.D. Leave:</b>	<b>Completed by H.R.:</b> <b>Verified by H.R.</b>  <b>Verified by H.R.</b>

<b>I acknowledge that if this application is approved, I will be required to agree to a contract specifying the terms and conditions of the leave.</b>	
_____ <b>Applicant's Signature</b>	_____ <b>Date</b>

<b>IMMEDIATE SUPERVISOR SECTION</b>	
<b>(Please also include information regarding any replacement issues which may apply)</b> I recommend this PD Leave.      I do not recommend this activity.      Comments: _____ _____	
_____ <b>Supervisor Signature</b>	_____ <b>Date</b>

<b>VICE PRESIDENT SECTION</b>	
_____ <b>VP's Signature</b>	_____ <b>Date</b>

**NOTE: Approved P.D. leaves with costs associated in item 2 will be forwarded for CESC for consideration for funding.**