

PITTSBURG STATE UNIVERSITY

APPLICATION FOR: ADMINISTRATIVE REASSIGNMENT

Name: _____
(Dr./Mr./Ms.) (First) (MI) (Last)

Title/Rank: _____

Department _____ College _____

Request for: 20 Fall Semester 20 Spring Semester 20 Summer Semester

Year of first appointment to PSU faculty: _____

Number of Years on tenure-earning appointment: _____

Year(s), if any, in which all other sabbatical(s), reassignment(s) or leave(s) was/were taken (please list here the semester(s)/year(s) – SP01, WF02, AY11, etc.):

On separate sheets, in as much specific detail as possible, explain each of the following:

1. The purpose of the reassignment in general;
2. The research, study, or professional experience that is proposed;
3. Where such research or study will be done, indicating libraries, laboratories, facilities, or personnel to be consulted and utilized;
4. How this administrative reassignment will benefit your administrative duties, teaching and your students;
5. How this administrative reassignment will benefit your research;
6. How this administrative reassignment will benefit Pittsburg State University; and
7. How your administrative duties will be covered during this requested absence?
8. **NOTE:** A one to two page report is due to the Dean and Provost within one month following your approved administrative reassignment.

This application will be reviewed by both the Dean and the Provost, each providing letters of support or non-support for this requested administrative reassignment.

(Complete and send to: Office of the Provost 220 Russ Hall, with Dean's letter of endorsement)

1. Dean's Endorsement (or immediate supervisor): I endorse this request.
(Attach typed narrative stating your support or non-support of this request. This narrative should be copied to the applicant.) I do not endorse this request.

Date

Signature

2. Provost/VPAA Endorsement: I endorse this request.
(Attach typed narrative stating your support or non support of this request. This narrative should be copied to the applicant.) I do not endorse this request.

Date

Signature

3. President's Endorsement: I endorse this request.
(Attach typed narrative stating your support or non support of this request. This narrative should be copied to the applicant.) I do not endorse this request.

Date

Signature