

Faculty Development Leave Application
Texas Southern University (TSU)

Name: _____ Department: _____

T-Number: _____ Date of Appointment at TSU: _____

Title/Rank: _____ Years in Rank: _____

Years of Full-Time Service at TSU: _____

Tenure Date: _____

Date of Last Faculty Development at TSU: _____

Proposed Period of Leave: _____

Proposed Objective:

Provide a letter addressing numbers 1 and 2 below or use the space below to elaborate:

1. Provide a brief summary of why you are requesting a faculty development leave or attach a letter of justification.

2. Provide a project description, statement of how the research or creative arts project will contribute to Texas Southern University, and a statement of how the research will contribute to the educational experiences of TSU students.

3. Attach your Curriculum Vita.

I have read the Faculty Development Leave Policy and will abide by it.

Applicant	Signature	Date
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Department Chair	Signature	Date
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Dean	Signature	Date
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Provost and Vice President for Academic Affairs and Research	Signature	Date
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President	Signature	Date
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