Faculty Sabbatical Policy

Purpose
A sabbatical is a temporary leave for the purpose of enhancing teaching competence, conducting research, publishing, undergoing occupational and professional development, travelling for the purpose of improving professional competence, acquiring new skills, Diné culture and language studies, volunteering, and other related activities.

Terms and Conditions
A full-time faculty member or an academic administrator who has spent at least seven (7) years of unbroken service to Navajo Technical University may be granted a sabbatical for professional development or research activities for a maximum of two semesters. This may be granted once in the seventh year of service to increase the value of the faculty to the university.

The university may pay up to 50% of the regular annual salary to a faculty member who is on sabbatical. A faculty member on sabbatical cannot take a full-time employment from another organization while continuing to be paid by NTU.

If a faculty member is granted a sabbatical, the faculty member must sign a sabbatical contract. A faculty member on sabbatical must be available by email or telephone in case information is needed from the faculty member regarding NTU matters. To minimize disruption of instructional activities, no more than one faculty member from the same program can take a sabbatical at the same time.

As part of the approval process, the faculty member must describe the scope of the project, research, and other professional activities to be performed during the time of a sabbatical.

When a faculty member or an academic administrator is on sabbatical, his or her employment status and benefits will remain intact.

A faculty member who is granted a sabbatical for one semester is required to work for NTU for at least one year after the sabbatical, or two years if granted two semesters of sabbatical. If an employee who is granted a sabbatical does not return to NTU after sabbatical, the employee must pay back to NTU the salary earned during the period of the sabbatical.

Upon completion of a sabbatical, the faculty member is required to submit a report to the Department Chair, the Academic Dean, and the Provost. The report shall include accomplishments and developments relevant to increasing the value of the faculty member’s department and the university.
NTU Faculty Sabbatical Request Form

To meet the review and consideration guidelines, all request forms must be signed and submitted to the Human Resources by the deadline. The timeframe must be sufficient for the university to recruit adjunct faculty to teach the course(s) during the absence of the faculty member. There are two scheduled leave terms that are scheduled, only one may be selected. The deadline indicates the date and time to submit all signed documents:

- Spring Semester Sabbatical Request Deadline: **September 1 at 5 p.m.**
- Fall Semester Sabbatical Request Deadline: **May 1 at 5 p.m.**

Upon the completion of the granted sabbatical, the faculty member is advised to report back to his or her regular duties prior to the commencement of the upcoming semester.

NTU Department: ____________________________________________________________

Name and Title of Faculty Member: ____________________________________________

Faculty Member’s Signature: ___________________________ Date: ________________

**Anticipated Course(s)  Semester: Fall___________  Spring___________**

Course Title: ___________ Course Number: _____ Credit Hours: ______
Course Title: ___________ Course Number: _____ Credit Hours: ______
Course Title: ___________ Course Number: _____ Credit Hours: ______
Course Title: ___________ Course Number: _____ Credit Hours: ______

**NTU Administration Endorsement**

Chair’s Signature: ___________________________ Date: ________________

Academic Dean’s Signature: ___________________________ Date: ________________

HR’s Signature: ___________________________ Date: ________________

Provost’s Signature: ___________________________ Date: ________________

President’s Signature: ___________________________ Date: ________________