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# UNIVERSITY OF WISCONSIN–WHITEWATER SABBATICAL/FELLOWSHIP APPLICATION COVER PAGE

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Applicant Name: \_\_\_\_\_

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

Years of Service: \_\_\_\_\_

Year of Tenure Decision: \_\_\_\_\_

Sabbatical/Fellowship Support Time Period

- 2012-2013 Academic Year (up to 65% compensation)
- Fall 2012 Semester (up to full compensation)
- Spring 2013 Semester (up to full compensation)

Supplemental support required through a Chancellor's Fellowship?

- NO       YES

[OPTIONAL] The applicant for sabbatical/fellowship is a (please check appropriate)

- Member of an Ethnic Minority       Woman

Title of Project: \_\_\_\_\_

Abstract, summarizing sabbatical/fellowship activities (Please limit to a short and clear paragraph of three to four sentences.) *Abstract text must also be provided electronically to [ehlend@uww.edu](mailto:ehlend@uww.edu).*

### **AFFIRMATION**

I hereby agree to return to the University of Wisconsin-Whitewater for at least one academic year of full-time service immediately following the termination of the sabbatical/fellowship, or repay any compensation (salary, plus the university's share of fringe benefits) I have received from the university during the sabbatical/fellowship.

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(Applicant's Signature)

(Date)