

**Indiana University****School of Education****Professional Leaves Program for Clinical Faculty****PURPOSE**

The primary role of a clinical faculty member in the School of Education is to teach and provide instructional supervision. To maintain current knowledge to teach, clinical faculty members may need to participate in activities to enhance their teaching activities. The clinical professional leaves program is offered to provide time for clinical faculty members to engage in activities to keep current in developments in their fields of service or enhance the reputation of the School and University.

A professional leave is not a leave which a clinical faculty member automatically "earns" by having been employed for a given period of time. Rather, it is an investment by the School in the expectation that the professional leave will significantly enhance the faculty member's capacity to contribute to the instructional objectives of the School. For this reason, professional leave applications are approved only if there is adequate reason to believe that they will achieve this purpose.

A statement of proposed use of time is required to indicate the manner of achieving these general objectives. Adherence to an approved plan is expected of a clinical faculty member. At the termination of the leave, and not later than three months after his/her return to the campus, the clinical faculty member shall submit a report of his/her activities to the Office of the Dean of the School of Education on a form available in the Dean's office. A copy of this report should also be delivered to the appropriate departmental chairperson or program head. This report must be filed because it will be attached to the clinical faculty member's application for a future professional leave before it is circulated to the committee. Acceptable programs must include a planned, organized, and productive set of activities designed to enhance the clinical faculty member's teaching skills and should emphasize:

1. Developing or enhancing teaching or technical skills, program or curriculum development, or research and service in support of teaching.
2. Other projects satisfactory to the School of Education Faculty Affairs Committee.

**TERMS OF LEAVE**

Professional leave will be for one semester at full salary or for one year at half salary. A professional leave need not be taken in a single academic year but may be divided over several years. The professional leave program requires that persons on professional leave devote full time to the teaching-related activities for which the leave is granted and will receive no salary or stipend from other sources than the University except that (1) persons

on leave for a year at half pay may engage in other activity consistent with that for which leave is granted and receive salary, stipend, or honoraria from other sources in such amounts that total salary, stipend, and honoraria do not exceed approximately the annual income normally earned, and (2) persons on leave may receive grants from other sources for travel and research expenses incident to their activity.

### **ELIGIBILITY**

A clinical faculty member in the School of Education at Indiana University is eligible for one professional leave during each period of seven year's full-time service (including time on professional leave), following the completion of the first six years of full-time service as a clinical faculty member.

For example, a faculty member may be granted one professional leave in the seventh, eighth, ninth, tenth, eleventh, twelfth, or thirteenth year of service, and one in the fourteenth, fifteenth, sixteenth, seventeenth, eighteenth, nineteenth, or twentieth year of service. Ordinarily, however, a professional leave will not be granted within less than four years following a preceding professional leave. For example, a clinical faculty member who is granted professional leave in the twelfth year would not again be eligible until the seventeenth year. Leaves without pay do not count as part of the period by which eligibility for professional leave is determined, except that recipients of nationally or internationally competitive fellowships may count up to one year toward their next professional leave. The professional leave program applies only to persons who will return to their positions in the School of Education for at least one academic year following a period of professional leave. For example, a professional leave will not be granted for the last year of a clinical faculty member's service prior to retirement. To be eligible for professional leave, a clinical faculty member must agree to reimburse Indiana University for any salary, retirement contributions and insurance premiums paid during the professional leave in the event the clinical faculty member does not return for at least one year following the leave.

### **SCHEDULING**

As far as possible, departmental schedules should be arranged so as to permit eligible members of the staff to take leaves. In arranging schedules, an attempt should be made to minimize the cost of substitute instruction and the disruption of the departmental program. To facilitate planning, clinical faculty members who intend to apply for leave during any part of one school year must give notice of intention to apply to the appropriate departmental chairperson by September 15, and applications shall be submitted to the Executive Associate Dean no later than October 1 of the preceding school year. Application forms may be obtained from the School of Education web site.

### **ADMINISTRATION**

Applications for leave will initiate with the eligible clinical faculty member. The application will be routed through the Dean's office for appropriate action.

#### **Department**

The departmental chairperson is responsible for assuring that no essential departmental

and student needs are jeopardized because of the number of faculty members in a given area on sabbatical or professional leave. The chairperson will attach a statement showing the proposed schedule adjustments to permit the leave. The departmental chairperson is also responsible for attaching a specific evaluation of the faculty member's project. The chairperson may utilize the advice of a departmental committee or of individual colleagues, here or elsewhere. Even if the chairperson does not approve the project, it must be forwarded to the Dean of the School of Education for review.

#### **Executive Associate Dean of the School of Education**

The Executive Associate Dean will determine eligibility for a professional leave.

#### **Faculty Affairs Committee**

The Faculty Affairs Committee of the School of Education will review the application and make a recommendation to the Dean about the proposal. The Committee may, at its discretion, ask the clinical faculty member for more information or suggest changes to the proposal and invite resubmission prior to making a final recommendation to the Dean. In arriving at its recommendation, the Committee will take into consideration the record of accomplishment on previous professional leaves and the instructional needs of the School. The Committee may call upon other members of the faculty or on outside experts for an evaluation of the merits of the proposal.

The Dean's Office may also ask the chairperson of the department if scheduling problems present obstacles to granting leave. If the number of otherwise acceptable applications for one semester or year is so great as to cause excessive expense to the School or an unreasonable increase in the teaching load of other staff, the Dean's Office will determine a schedule of priorities among the applications.

The applicant will be given the opportunity to make representation to the Committee, as well as to the Dean's Office, if recommended by the department chair, Committee, or Dean to support the application. The Dean of the School will notify the applicant of the final decision on the proposal and a copy of the notification will be sent to the appropriate department chairperson. However, a favorable recommendation by the Committee and the Dean of the School of Education establishes sufficient likelihood of a grant of professional leave so that applicants are justified in proceeding with plans and arrangements for leave.

**SCHOOL OF EDUCATION  
APPLICATION FOR PROFESSIONAL LEAVE FOR CLINICAL FACULTY**

Name:

Academic Title:

Department:

Effective date of initial appointment as a full-time clinical member of the faculty of Indiana University:

Periods of previous professional leave:

Periods of leave of absence other than professional leave:

With Pay—

Without Pay—

Indicate period for requested leave. (Options include one semester at full pay, a full academic year at half pay, or a divided leave as described in the documentation of professional leaves for clinical faculty.)

**Action by Department Chairperson:** Please attach a statement (a) evaluating the proposed project and (b) explaining scheduling adjustments that can be made within the department. The evaluation may be based on advice from a departmental committee, from colleagues, or from external evaluators. Whether or not the chairperson approves the application, it must be forwarded to the dean of the School.

I (do) (do not) recommend the approval of this professional leave project. (Attach explanatory memo.)

\_\_\_\_\_  
(Chairperson)

\_\_\_\_\_  
(Date)

(If necessary, attach extra sheets)

1. **Title of Proposed Professional-Leave Project.**

2. **Description of Project.** Describe your project below. Make clear the purpose of the project and explain its rationale. Provide enough detail on procedures, time schedule, and resources so that the plan can be judged for thoroughness of planning and for feasibility. Explain how you intend to allocate your time to the different tasks you plan to undertake.

PLEASE NOTE: If you have submitted a grant application for the project you wish to pursue while on professional leave, you may attach a copy and on this page and the following page fill in any information that is not contained in the grant application.

3. **Location of Project.** State the principal location of your project. Indicate plans for travel and arrangements for use of libraries, laboratories, or work with colleagues at other institutions. If you plan to work at other libraries, archives, institutions, laboratories, or the like, please indicate whether you have yet secured permission to do so.

4. **Applicant's Qualifications.** Summarize your academic background and accomplishments related to this project that bear upon its probable success. Attach a current curriculum vitae and other relevant data.

5. **Sources and Amounts of Funds.** List sources and amounts of funds in the form of grant, fellowship, allowance for expenses, or payment for services (including approved teaching) during the period of the professional leave. (Please note that such funds must be paid for services which are consistent with the professional leave program. Therefore, most regular teaching, consulting, or similar activities may not be used to supplement a professional leave stipend.)

6. **Value to the School of Education.** Explain how this leave will provide value to the School of Education. As part of this explanation, note how your project meets the guidelines for professional leaves described in the professional leaves policy.

7. **Signature of Applicant.**

I have read the School of Education rules governing the professional leave of absence. I agree not to accept any employment during the period of leave that has not been explained in this application. *In the event I do not return for at least one year immediately following the professional leave, I agree to reimburse Indiana University for any salary, retirement contributions, and insurance premiums paid during the professional leave.*

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date)

**Recommendation of the Faculty Affairs Committee**

Approve as proposed

Deny (explain)

Approve with conditions (explain)

Signature of the Chair of the Faculty Affairs Committee:

\_\_\_\_\_  
(Chair)

\_\_\_\_\_  
(Date)

**Decision by the Dean of the School of Education**

Approve

Deny

Comments:

Signature of Dean:

\_\_\_\_\_  
(Dean)

\_\_\_\_\_  
(Date)