Suffolk County Community College

FACULTY RETRAINING LEAVE APPLICATION

Use this form if you are applying to be funded for faculty retraining in areas or disciplines where the college expects growth, as defined by the college brief from the Vice President for Academic and Student Affairs.

This form shall be submitted to the **Office of the Vice President for Academic and Student Affairs** no later than March 1. *Updated application should be submitted with required report.*

1. Name: _____

2. Current Discipline: _____

3. Degrees:

Degree	Field	Year Awarded
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Proposed discipline/area: _____

5. Previous experience and education related to proposed discipline/area:

6. College/University you plan to attend, or other means by which retraining will be accomplished.

Revised : November 1, 2006

7. Proposed degree and/or program/course of study:

8. Provide written description of scope and goals of proposed program and how they relate to your professional and personal goals.

9. Proposed outline, by semesters, of the courses you plan to take, or the program you plan to follow. (Include a copy of the **current catalog** description of the program and courses, or other documents descriptive of your program.)

10. Anticipated cost per semester (tuition, books, fees) of your program/course of study. (Attach a copy of the **current** catalog statement of tuition and fees, or equivalent information for your program.)

11. Anticipated need for released time for each semester involved. Explain.

I have reviewed the contract language (Article V.D.5, (pp29-30) relating to Faculty Development and Retraining Leaves. All questions must be completed in order for your application to be considered. A written report and transcript will be required 8 weeks after completion of the course (s).

Signature Date