



CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT

Workload Banking: Augment Sabbatical Salary

Article 12-1A.



NOTE: Article 12-1A.4(g) of the Contract states that this shall be submitted with the original Sabbatical Leave of Absence Application by September 15th of each Calendar Year.

(Please Print)

TO: Vice President, Academic Services

FROM: _____ **W#** _____
(Please Print Name)

DATE:

SUBJECT: Request to Use Earned Bank Load to Increase Salary on Sabbatical Leave

Per Article 12-1A.4(g) in the CBA, Faculty may apply CAH from their Workload Banking account to improve their Sabbatical Leave salary.

In order to be compensated at full salary for a full Academic Year Sabbatical Leave (continuous or split), a Faculty member must have banked nine (9) CAHs equivalent units of earned Banked Load. If the faculty member has fewer than nine (9) CAH banked, they may apply 1-8 CAH to improve their salary in accordance with the table shown in Article 12-1A.4(g)(1).

In order to be compensated at full salary for a one (1) semester Sabbatical Leave, a Faculty member must apply three (3) CAH equivalent units of earned Banked Load to be compensated at full salary. (Note: for Library or Special Assignment faculty, the requirement is 1.5 CAH.)

A faculty member taking a Sabbatical Leave of Absence has until the end of the Term preceding the leave to complete the required load banking. [Article 12.1A.4(g).]

COMPLETE THE FOLLOWING:

A. I am applying for a Sabbatical Leave of Absence for:

1. One (1) semester Leave: _____ (Indicate semester/year)
2. One (1) continuous year Leave: _____ (Indicate academic year)
3. One (1) year split Leave: _____ (Indicate semester and years)

B. Indicate the number of CAHs equivalent units of earned Load you have currently Workload Banked and intend to use for this leave (do not include units in progress): _____

C. Indicate, if applicable, the number of additional CAHs equivalent units of Load you plan on workload banking before your Sabbatical Leave and intend to use for this leave:

Fall _____ Spring _____ Summer _____

Signature: _____ Date: ____ / ____ / ____

Approved Disapproved

Division Dean/Administrator Signature: _____ Date: ____ / ____ / ____

FOR OFFICE USE ONLY	
Verified By: _____	Date: ____ / ____ / ____
(Vice President, Academic Services)	

Original signed copy to be attached to Sabbatical Leave of Absence Application that will be provided to HumanResources.	
cc: Division Dean Vice President, Academic Services Faculty Applicant	

Reference: Article [12-1A.4\(g\)](#)- Faculty Collective Bargaining Agreement