



**CALIFORNIA STATE  
UNIVERSITY CHICO**  
Office of Academic Personnel

Kendall Hall Room 104  
400 W. 1st Street  
Chico, CA 95929-0024  
530-898-5029  
FAX: 530-898-4438

**Sabbatical or Difference-in-Pay  
Leave: Request for Additional or  
Outside Employment**

Name \_\_\_\_\_

Date \_\_\_\_\_

College: \_\_\_\_\_ Dept/School \_\_\_\_\_

*(check one only)*

*(check one only)*

Status:  Faculty

Probationary\*

Counselor

Tenured

Librarian

Temporary

Type of Leave Awarded :

Sabbatical

Difference-in-Pay\*

One Semester (full pay)

One Semester

Academic Year (half pay)\*

Academic Year

Dates of Leave :

Fall 20\_\_\_\_ Spring \_\_\_\_\_ Academic Year \_\_\_\_\_

Other: From \_\_\_\_\_ To \_\_\_\_\_

Please describe the Additional or Outside Employment you are seeking approval for. Be sure to include a description of the work you will be compensated for, where the work will be performed and the approximate duration of the work (ex: 10 hrs/ week for 6 months).

\_\_\_\_\_  
Signature of Requester

\_\_\_\_\_  
Date

**RECOMMENDATION OF DEPARTMENT CHAIR / DIRECTOR:**

Having reviewed the applicant's Request for Additional or Outside Employment during their sabbatical or DIP leave of absence, I recommend approval.

Yes     No

\_\_\_\_\_

Department Chair / Director

\_\_\_\_\_

Date

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**RECOMMENDATION OF DEAN / \*VICE PRESIDENT FOR STUDENT AFFAIRS** (*\*for counselors only*)

I have reviewed the applicant's Request for Additional or Outside Employment during their sabbatical or DIP leave of absence, along with the recommendation of the Department Chair/Director and the College/ Unit Leaves Committee. My recommendation is as follows:

Approval:     Recommended     Not Recommended

\_\_\_\_\_

Dean or

\_\_\_\_\_

Date

Vice President for Student Affairs\*

(*\*for counselors only*)

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**DECISION OF PROVOST / \*PRESIDENT** (*\*for counselors only*)

Approved

Not Approved

\_\_\_\_\_

Provost or

\_\_\_\_\_

Date

President (*for counselors only*)

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Reference: Unit 3 Collective Bargaining Agreement; California State University; CSU, Chico Faculty Personnel Policies and Procedures;

ORIG: College PAF or Personal File | Copy 1: Applicant | Copy 2: Provost/Designee