

Application for Professional Development Leave (PDL) Program For Academic Year 2025-2026

APPLICATION DEADLINE: Thursday, October 9, 2025 by 5:00 p.m.

Applications received after the stipulated deadline will not be considered. Please merge this file with your application material before signing it. Applicants must submit by email to: AA-BAP@usf.edu.

Designate order of preference (1=most preferred) - You are not obligated to fill out every box:

One Semester at FULL PAY ____ Fall ____ Spring

____ Two Semesters at ONE-HALF PAY (Fall and Spring)

Last Name _____ First Name _____

Current Rank: _____

Salary source: ☐ E&G

☐ Grant/Contract (Attach a copy of permissive language from grant/contract which provides for professional development leave with pay)

Department/Unit _____

College _____

Campus _____

Date of Initial USF Employment _____

Term of Last PDL* (if applicable): _____

Type of Last PDL ☐ One Semester/Full Pay ☐ Two Semesters/Half Pay

**If the applicant has had a prior Professional Development Leave, then they must attach a narrative to show what was produced during the prior leave and its benefits to the university and the employee.*

Account for all absences from full-time teaching since date of initial USF employment, other than Professional Development Leave. For example: leave without pay, Fulbright, departmental release time, sponsored research, etc.

****Indicate "with" or "without" pay.**

Date	Purpose	Pay**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



- A. Attach a detailed description of the project/work to be accomplished during the PDL including a specific set of objectives and how they would be accomplished. **(Limit to 3 pages, double-spaced.)** If your options include both a full-pay and half-pay PDL, provide a workplan and timeline for both.

All applicants must also provide a current curriculum vitae.

- B. Describe the benefits of your proposed sabbatical to:

(1) Yourself (Max. 800 characters)

(2) The University - Please include how your proposal aligns with USF's strategic priorities advancing student success and research excellence. (Max. 800 characters).



(3) Your Profession/Discipline (Max. 800 characters)

- C. Does the PDL work plan require travel or the expenditure of funds for expenses or equipment? (If so, explain, including a statement of your plans to obtain such funding.)

- D. Report here or by accompanying letter any additional information that you deem worthy of consideration by the selection committee.

By signing below, the applicant attests that the information submitted in this form is correct and agrees to comply with the conditions of the PDL program as described in the current Guidelines.

Applicant

Department Chair/Director*

Campus Dean or Regional Vice Chancellor (if applicable)*

College Dean*

**Constitutes acknowledgment only; does not imply endorsement of application.*

TO BE COMPLETED BY THE COLLEGE COMMITTEE:

Does the application satisfy the minimum requirements? ☐ Yes ☐ No
(If no, the rating assigned should be "4" - not recommended for approval.)

- Rating:**
- ☐ 1 Highest recommendation, recommended for approval
 - ☐ 2 Good proposal, recommended for approval
 - ☐ 3 Marginal proposal, not recommended for approval; may serve as an alternate if an awardee declines
 - ☐ 4 Not recommended

College Committee Chair:

Name: _____

Signature: _____ Date: _____

It is the responsibility of the College to send the full applications with ratings to AA-BAP@usf.edu by the deadline specified in the Guidelines.