**Sabbatical Proposal**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have completed five years of service and I request a sabbatical from the date \_\_\_\_\_\_\_\_\_\_\_\_\_ to the date \_\_\_\_\_\_\_\_\_\_\_\_ (if other time away is desired, please list that as well).

Please list plans for while on sabbatical and approximate cost for each:

While away, my work will be covered via (this is not to be exhaustive but developed with direct supervisor to ensure work continues):

Please list any major ministry opportunities you will be missing while away:

I foresee the benefit of the sabbatical for me as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I foresee the benefit of the sabbatical for those I serve as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have read the sabbatical policy and realize while eligible, sabbaticals are a gift and must be approved with consideration to budget, other’s schedules and what is best for the church.

Requesting Minister Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_

Immediate Supervisor Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_

Department Head Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_

*Signed copies of this document are to be provided to the department head and Executive Pastor’s office no less than sixty days before desired sabbatical time frame.*

EXECUTIVE PASTORS’ OFFICE USE: Once appropriate Executive Pastor’s signature is applied copies of signed documents are to be distributed to Business Administrator, Applicant, Applicant’s Immediate Supervisor and Department Head.