

**Checklist for Applications for  
Fellowship Award**

**Note:**

- Applications accepted only once per academic year in fall (Deadline \* Dec. 1)
- Code of Practice Regarding Instructional Staff Academic Leaves – Please read for complete details on eligibility, types, review and approval, reporting, calendar leave dates, terminating leave and compensation.
- **While on leave, the faculty member is expected to devote her/his time and energy to the purpose for which the leave was granted. As a general rule, employment within or outside of the University during leaves is prohibited, unless such involvement is integral to the purpose for which the leave is granted, or there is a compelling justification and may be engaged in only with prior approval of the president [page 13]. See section III.7. Attestation of Applicant on page 3 of the application and section 7. Academic Leaves and Multiple Positions on page 13 of the Code of Practice Regarding Instructional Staff Academic Leaves (attached to the RFP email).**
- Code of Practice Regarding Instructional Staff Academic Leaves – Please read for complete details on eligibility, types, review and approval, reporting, calendar leave dates, terminating leave and compensation.
- Submit form to: provost.eforms@lehman.cuny.edu with a copy to Edna.Norman@lehman.cuny.edu and Deborah.RhemJackson@lehman.cuny.edu

Faculty Name: \_\_\_\_\_

School \_\_\_\_\_ Department \_\_\_\_\_

1. Confirmation of Eligibility from HR (Z. Rosa) attached.      Yes    or    No

2. Previous Fellowship or Scholar Incentive Leave?      Yes    or    No

    a) If **Yes**, copy of last Leave Report attached?      Yes    or    No

3. Pay Rate, duration and dates of proposed leave completed?    Yes    or    No

**Fellowship Award Information**

**Duration and dates of the proposed leave:**

Full year at 80% of biweekly salary rate      Semester \_\_\_\_\_      Semester \_\_\_\_\_

Half year at 80% of biweekly salary rate.      Semester \_\_\_\_\_

Half year at full pay      Semester \_\_\_\_\_

- a) If **non-consecutive semesters**, justification included?      Yes    or    No
  
- 5. Lehman CV (Updated/Most Recent) attached?                      Yes    or    No
  
- 6. Detailed description of proposed scholarly activity  
and/or Research Plan attached?                                      Yes    or    No

**Checklist for Applications for  
Fellowship Award - continued**

- 7. Is leave at another Institution?                                      Yes    or    No
  - a) If **Yes**, Letter of Support attached?                      Yes    or    No
  
- 8. Application Signatures & Approvals:
  - a) Faculty Member's Signature                                      Yes    or    No
  - b) Chair's Signature    Yes    or    No
  - c) P&B approval documented.                                      Yes    or    No
  - d) Dean's Signature    Yes    or    No

Office of Academic Personnel

Date Received: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Application Complete?      Yes    or    No

If no, follow-up and result (describe): \_\_\_\_\_

Confirmation of Completed Application –  
Emailed to Applicant (Date): \_\_\_\_\_