**Sabbatical Leave Program: Research activity plan**

## To: Director of Division of Research,

## Ritsumeikan University

MM/DD/YYYY

Affiliation:　　　　　　　 Position:　　　　　　 Name:

|  |  |
| --- | --- |
| 1. Category, etc. | [ ] Unspecified　　[ ] 　Early-career　[ ] 　Work-life Balance　[ ] 　Extramural Funds　[ ] 　Assistant Teaching Staff　　　　[ ] 　Research Recovery Measures　 |
| ２．Any change from descriptions in “Ritsumeikan University Request for Sabbatical Leave Program for Full-time University Teaching Staff/Research Plan” approved in the preceding AY | [ ] No ⇒To ３. below[ ] Yes ⇒Fill out (i) and (ii) before proceeding to 3. |
|  | (i) Change | [ ] Theme 　[ ]  Period [ ]  Class.　　[ ]  Destination 　[ ]  Research institute[ ]  Content [ ]  Other（　　　 　） |
|  | (ii) Detail |  |
| ３．Business-related trip immediately ahead of sabbatical period | [ ]  No　　[ ]  Yes⇒ (From MM/DD) |
| ４．Allowance allocation | [ ]  O.C　[ ]  Dom [ ]  O.S.　AMT：\[ ]  O.C　[ ]  Dom [ ]  O.S.　AMT：\[ ]  O.C　[ ]  Dom [ ]  O.S.　AMT：\ | Total \ |
| ５. Destination | Please fill in all fields even if there are no changes. If there are more than two locations, please add an additional line. |
| (i) | Period | MM/DD /YYYY-MM/DD / YYYY | 【Details】 |
| Destination |  |
| Research institute |  |
| (ii) | Period | MM/DD /YYYY-MM/DD / YYYY | 【Details】 |
| Destination |  |
| Research institute |  |
|  |  |  |  |
| ６．Plan for temporary return to Japan/research-related trip | Date | No. of days | Destination/objective/name of academic conference, etc. | \*Name of funds to be executed |
| ・\*Approx.・・・ | ・\*Approx.・・・ | ・・・・ | ・・・・ |

|  |  |  |
| --- | --- | --- |
| Head's approval | Administrative Manager's approval | Received by Research Office |
|  |  |  |

【Notes for filling out/submission】

Upon submission and approval, the details of the program will be finalized.

-Deadline: Three months prior to the commencement of the Sabbatical Leave Program

- To be submitted to: gairyu@st.ritsumei.ac.jp

- Submission format: PDF or Word