COLLEGE OF EDUCATION & HUMAN ECOLOGY DEPARTMENT OF _____ - SPECIAL ASSIGNMENT APPLICATION 20__ - 20__

NAME:	
Current Academic Title:	
Type of Appointment:	_
Years at OSU:	
Indicate Quarters and Years for Previous L	eaves:
FPL:	
SRA:	
LOA:	
Specify Quarters Requested for SA:	
Describe Any Supplemental Funding:	
Describe How Your OSU Responsibilities W	Vill Be Handled:
Locations Where Leave Will Be Carried Ou	ıt:
Please attach a sheet stating TITLE and DE EXPECTED OUTCOMES.	SCRIPTION OF SA ACTIVITY INCLUDING
Please sign and date:	
Applicant:	Date:
Department Chair:	Date:
Action by Regional Campus Dean (if applicable):	Date:
Action by Associate Dean, OFA:	Date:

Last Revised: 11/30/2018