

**Research Sabbatical and Unpaid Leave Report**

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|  | **Applicant:**  |  |

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| --- | --- | --- |
|  | **School:**  |  |

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| --- | --- | --- |
|  | **Period of Leave:** |  |

|  |  |  |
| --- | --- | --- |
|  | **Institution(s) where** **leave was spent:** |  |

|  |  |  |
| --- | --- | --- |
|  | **Programme of work** **undertaken:**  |  |

1. **Outcomes of the Leave period :**

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| --- |
| **6.1.Publications** |
| **Proposed Outcome** | **Details** | **Outcome Achieved** |
| Title:Details:Journal of publication:Submission date:Publication date: |  |  |
| Title:Details:Journal of publication:Submission date:Publication date: |  |  |
| Title:Details:Journal of publication:Submission date:Publication date: |  |  |
| **6.2. Monographs** |
| **Proposed Outcome** | **Details** | **Outcome Achieved** |
| Title:Details:Publisher:Submission date:Publication date: |  |  |
| Title:Details:Publisher:Submission date:Publication date: |  |  |
| Title:Details:Publisher:Submission date:Publication date: |  |  |
| **6.3. Conference papers** |
| **Proposed Outcome** | **Details** | **Outcome Achieved** |
| Title:Conference Details:Date of Presentation: |  |  |
| Title:Conference Details:Date of Presentation: |  |  |
| Title:Conference Details:Date of Presentation: |  |  |
| **6.4. Other Outcomes (including teaching duties, consultancy, etc.)** |
| **Details** | **Outcome** |
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1. **Append** an up-to-date IRIS Profile to this Report.
2. **Impact of period of Leave on International Standing**

*(For example, publications in international journals, presentations at international conferences, etc.)*

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| * 1. **Impact on individual profile and scholarly standing**
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| * 1. **Impact on School/ College/University**
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1. **Grants, emoluments received by applicant:**

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| --- | --- | --- | --- |
| **Name of paying authority** | **Name of grant and/or emolument** | **Amount of grant and/or emolument** | **Service in respect of emolument**  |
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1. **Signature of Applicant**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Signature of Head of School**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 This is to verify that the information provided above is accurate.

**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please submit your signed report and IRIS profile as one combined pdf file to: researchsabbaticalleave@universityofgalway.ie