

Fellowship Leave / Scholar Incentive Report

(NOTE: Text can be expanded or attach additional pages as needed)

Name:
Academic Rank:
Program/Department/School:
Fellowship Leave / Scholar Incentive Dates:
Date of this Report:

Provide a summary of your original plans and goals.

Describe your activities, outcomes and achievements, and links or references to publications or other works during or resulting from the Fellowship Leave / Scholar Incentive.

Describe and explain changes to your original plan. Assess the value or significance of these changes, if any.

Describe how your Fellowship Leave / Scholar Incentive contributed to your personal/professional development and how it provides a benefit to the Department/School/College in terms of (a) Teaching and/or Curriculum Development, (b) Research/Scholarship/Creative Activity, and (c) Service to your Discipline, City College and/or the public.

Scholar Incentive Awardees ONLY: Provide a list of agencies and institutions from which you received financial support to pursue your Scholar Incentive.

Faculty Signature: _____

Date: _____

Review by Chair

Name: _____

Date of Review: _____

Review by Dean	
Name:	Date of Review:
	Received by HR
Name:	Date of Receipt: