

Faculty Development Leave Summary Report Form

To be submitted within 6-months of the completed leave period as required by $\underline{Policy~06.010~Development~Leave}$ Return signed/completed form to Academic. Resources@unt.edu.

Name:	UNT ID:
Department:	Term(s) FDL Taken:
Please note information may be used	to post on website or other promotional materials.
Description of specific activities resu	ılting from leave:
Articles, books, book chapters or oth	ner publications written and accepted:
Grants written and submitted:	
New creative or artistic activity:	



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Contracts developed that have resulted in new research opportunities or opportunities for students:	r
Bibliography of works completed during leave:	
Other outcomes not listed above:	
Faculty Signature: Date: Date:	

Dean Signature: ______ Date:_____