## Application for Leave – Institutional Funded Scheme

The funded Institutional Leave Scheme is open to all staff who either undertake or enable research and require leave from their usual duties to bring to completion **a specific activity that will add to world-leading quality of our next REF submission, either in terms of outputs, impacts or research culture.**

The length of a period of research leave will not normally exceed 6 months.

Applications for leave should normally be submitted within the timeframe specified in the call for applications. A report of the outcomes of the research leave period must be submitted to [impact@abdn.ac.uk](mailto:impact@abdn.ac.uk) within a month of completion of the leave and ongoing, as required.

All applications should be supported by the Academic Line Manager and Head of School or Line Manager/Professional Services Director. Completed applications should be submitted to [impact@abdn.ac.uk](mailto:impact@abdn.ac.uk) by 4pm on 19 January 2024.

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| **1. Name of applicant** |
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| **2. List of planned outcomes – word limit 1,000** |
| *List here the planned activities which are proposed. Please be specific about the type of outcomes or activity (e.g. monograph or journal publication; major grant; engagement or impact case study, research environment activity) and the anticipated timelines ie why this activity, why now, and why this activity can’t be supported through standard school research leave or accommodated as part of your usual duties. Please comment in particular how research leave will be beneficial at this stage (assuming REF submission will take place in November 2027), and how the planned research outcomes will meet the criteria for REF 4\* research outputs, 4\* impact or 4\* elements of the research environment within the timeframe for REF submission.*  *For impact and environment/culture related applications, please submit a clear plan which outlines the anticipated outcomes and timelines.* |
| **3. Rationale for application – word limit: 1,000** |
| *Please state here how the research leave will add significantly to world-leading research outputs, impacts or research culture. For example, outline the strategic importance of pursuing a particular activity at this time, and how it will benefit the University’s submission to the REF. Please list clearly any previous external or internal funding for research leave in the last 5 years and outcomes from it (including research leave under a School scheme) and explain why this proposal should be funded from the institutional scheme.* |

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| **4. Dates of Proposed Research Leave (not normally longer than a semester/six months)** | | |
|  | **Start date** | **End date** |
| Please state the period of research leave requested *(spend must fall within 2024/25)* |  |  |

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| **5. Are supervisory commitments covered? YES/NO** *(please underline)* |
| *Please specify (e.g. communication with the student and second supervisor, etc.):* |

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| **6. How will teaching and assessment duties be covered?** |
| *Please specify (e.g. tutorials; marking; attending to students’ queries, etc):* |

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| **7. Are administrative duties covered? YES/NO** *(please underline)* |
| *Please specify (e.g. administrative roles/meetings; reporting from meetings, chairing, etc):* |

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| **8. Previous Research Leave**  *(Please provide details of other periods of research leave/mini research breaks, and outcomes, taken within the last 5 years)* | |
| **Dates:** | **Outcomes/outputs:** |
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| **9. Resources requested**  *(These may include teaching or other backfill and other allowable expenses. Please also list any resource commitment from your School or Professional Services Directorate)* | |
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| **10. Applicant Signature** | |
| **Signature:** | **Date:** |

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| **11. Academic Line Manager/Line Manager**  *(As Academic Line Manager please confirm that the plan for coverage of activities under questions 5-7 above has been discussed and agreed)* | |
| **Comments from Academic Line Manager:** | |
| **Print Name** | |
| **Signature:** | **Date:** |
| **12. Supporting Statement**  *(As Head of School/Director of Professional Service please confirm that you support the application and are willing to release the applicant from all teaching and administrative duties).* | |
| **Signature:** | **Date:** |
| **Print Name:** | |
| **Statement of Support:** | |