HAWAII-KURDISTAN
PARTNERSHIP for
Revitalizing Agricultural Higher Education and Development (KAHEAD)

NOMINATION FORM

FACULTY SABBATICAL LEAVE PROGRAM

Program Purpose
This program will provide opportunities for selected Kurdistan agricultural scientists, professionals and practitioners to undertake sabbatical leaves at the University of Hawaii or cooperating partners. The program is expected to enhance the professional and scientific development of the awardees and will contribute to improved agricultural learning, innovations and technology transfer. The recipients will also develop long-term beneficial partnerships with counterparts at host institutions.

Eligibility
Kurdistan university faculty and Ministry of Agriculture professional staff are eligible to apply.

Evaluation Criteria
1. Clear statement about the expected accomplishments during sabbatical leave
2. Well prepared proposal stating the professional development objectives, and methodology to be followed.
3. Evidence that the proposal can be successfully and economically executed during the proposed time.

Allowed Expenses
KAHEAD will support travel, residence, subsistence, health insurance and other non-personal expenses necessary to perform the proposed work.

How to apply
Completed applications should be scanned and submitted electronically (by e-mail) to KAHEAD’s Hawaii Office (ekhlass@hawaii.edu) no later than 2 months before the proposed start of the activity. The Department Head and College Dean must approve and sign the nomination. Send copies of the application also to KAHEAD’s office in Erbil, Kurdistan (kaheadkurdistan@gmail.com). The application format is stated below:

KAHEAD Project at UH, NREM/CTAHR/UHM, 1910 East-West Road, Honolulu, HI 96822, USA
Ph: +1-808-956-6343, Fax: +1-808-956-6359, Email: kahead@hawaii.edu
**Required Information**

*Applicants are urged to attach their G passports (first 2 pages), resumes or Curriculum Vitae (CV) and additional pages to clarify necessary details*

Full Name (EXACTLY as shown on the official G passport) ________________________________

Employing university/college or MOA division ____________________________________________

Area of specialization __________________________________________________________________________

Position ___________________ Rank _______________ Office Phone/Fax _____________________________

Number of full years in present position ________

Proposed departure date ______________________

Proposed duration ________________ Month(s)

Title of proposed topic ________________________________________________________________

**Objectives:** Itemize and describe your proposed project and its relationship to your current expertise.

a. 

b. 

c.

**Approach:** Explain the procedure/methodology to be followed for each objective

a. 

b. 

c.
**Benefits to Professional Development:** Explain how the proposed sabbatical leave will benefit you and your current and future responsibilities.

**Estimated Budget:** Itemize anticipated operational costs aside from the allowed personal expenses listed above.

---

**Signature of Applicant**

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

---

**Administrative Approval**

Department Head or College Dean Approval

*Attach a separate signed statement from your administrator reflecting approval of your proposed project.*

*Do not write below*

---

**Program Evaluation and Approval**

*This section is for the use by the KAHEAD administration at UH*

Comments by Reviewer and/or Prospective Host:

<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

Evaluation and Recommendation

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>

Approval/Disapproval by KAHEAD Director, Dr. Samir EL-Swaify

<table>
<thead>
<tr>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
</table>