University at Buffalo
Humanities Institute
College of Arts and Sciences

Humanities Institute Faculty Fellowship

Department Chair Agreement Form

Letter of Agreement from Department Chair

To: The Humanities Institute Faculty Fellowship Review Committee:

As Chair of my department, should his/her application to the University at Buffalo Humanities Institute Faculty Fellowship be successful, I offer my approval for faculty member:

_____

to be placed on Research Leave for the following academic semester:

☐ Fall 2026 ☐ Spring 2027

I understand that a research leave request will need to be submitted to the CAS Human Resources team for processing.

I understand that funds will be provided to cover course replacement costs at the applicable base adjunct instructor rate per 3-credit hour course at the time of the leave, directly from the Office of the Dean of the College of Arts and Sciences through submission of the "Course Release Funding Request" form (which will be provided upon determination and acceptance of awardees), as state operating budget funds to the department temporary service adjunct account (420093-XX for most departments).

_____ _____

Chair Signature Date

_____ _____

Chair Name (printed) Department

Questions or concerns?
Contact Maki Tanigaki via email at huminst@buffalo.edu or by phone (716) 645-2591