The Office of the Provost is pleased to invite applications from faculty eligible for the 2024-2025 Full-time Non Tenure-Track (FTNTT) Faculty Fellowship Program, which funds FTNTT faculty for a one term paid leave (“Fellowship”) with the purpose of engaging in professional activities that benefit the faculty member and the university. Faculty will be paid 100% salary for the term that they are on leave. The current program is a continuation of the successful program launched in 2019-2020 in the Office of the Provost. A faculty member will only become eligible for another fellowship again after having served another six academic years as a full-time faculty member at Northeastern University, beginning with the end of the previous FTNTT Faculty Fellowship.

**Eligibility:**
1. Eligible FTNTT faculty titles: Associate Teaching Professor, Teaching Professor, Associate Clinical Professor, Clinical Professor, Associate Academic Specialist, Senior Academic Specialist, Senior Lecturer and Principal Lecturer;
2. FTNTT faculty member must have been employed at the university for a minimum of 6 years (full-time) by the time of application;
3. FTNTT faculty member must hold the rank of associate or senior status, in good standing;
4. The fellowship will be one semester in duration;
5. The fellowship cannot be used to teach at another university;
6. The faculty member cannot be paid salary from another institution during the leave; however, housing and other expenses may be covered by another institution and must be documented in the application.

**Application must include:**
1. Description of the proposed plan for the leave; detailed explanation of how the proposed activity will benefit the university and the faculty member’s work at the university; specific expected outcomes. **No more than 5 pages.**
2. Current and up-to-date CV, including all teaching activities in the past three years and TRACE (or comparable evaluations if TRACE is not used) summary table indicating courses taught, enrollment, and TRACE instructor effectiveness score.
3. Letter of support from the faculty member’s chair/ unit head (in departmentalized colleges).
4. Agreement to file a report within 60 days of returning to campus after the leave.

If proposing to conduct research at a network campus, please also include:

5. Description of the proposed research plan that includes the proposed research area, expected impact, research experience, and qualifications of the applicant. **No more than 2 pages.**
6. Letter of support from the network campus dean indicating they have been made aware of and approve of the activities.
Examples of types of leave that may be supported:
1. Visiting another institution of higher learning to observe and learn new strategies, methods, or innovations in teaching;
2. Teaching courses at a different Northeastern college/school /network campus;
3. Taking courses to improve the faculty member’s expertise in subject matter or teaching methods;
4. Engaging in professional activity at a company, academic, government, or non-profit organization, or laboratory, in support of positively impacting the faculty member’s teaching/research/creative activities, or innovation (entrepreneurial) endeavors;
5. Focusing on research at one of our network campuses that is consistent with our current university focus (e.g., health, sustainability, security, artificial intelligence, cognitive and brain health).

Application Procedure:
1. Compile an application package consisting of the cover sheet (see page 3), the fellowship application, letter(s) of support from chair/ unit head (in departmentalized colleges) and network campus dean if proposal includes work at a network campus.
2. Submit all application packages to the college’s Associate Dean for Faculty Affairs by February 26, 2024. Each college shall determine its own procedure for the review of applications.
3. Each college dean shall determine the number of fellowship positions available for faculty in a given year and will communicate this information to the Associate Dean for Faculty Affairs. Faculty whose applications are not recommended by the dean will receive a letter from the dean’s office. For the recommended applications, the college dean’s office shall send a memo, accompanied by the full application packets of the finalists to the Vice Provost for Faculty Affairs, Jackie Isaacs (j.isaacs@northeastern.edu), by March 29, 2024.
4. Notification of decisions from the Office of the Provost will be sent to the faculty, unit head and college dean by April 12, 2024.

Obligations to Northeastern University:
Upon returning to Northeastern University after the Fellowship, the faculty member will submit a written report of the activities to the dean, with a copy to the unit head and to the Office of the Provost. The report should include a summary of original goals, outcomes, and continued work. In addition, faculty members must resume their usual duties at the university for at least one academic year following the completion of the leave. Failure to do so requires the faculty member to refund the salary paid during the leave.

Faculty members will continue to receive the following benefits during the leave:

1. Medical, dental, life, and disability insurance;
2. Group medical plan, if the faculty member continues regular contributions, either on a monthly or prepaid basis for the leave period;
3. If participating in the retirement program, the university will match up to 10 percent of the portion of the individual’s salary provided the faculty member contributes a minimum of 5 percent of the same salary.
COVER SHEET

FTNTT Faculty Fellowship
Proposal Cover Sheet for 2024-2025 Leave

__________________________________________  __________________________________  __________________________________
Name (please print / type)               Faculty Rank               Department/College or School

Date of Initial Appointment at Northeastern: __________________________________________

Proposed Schedule for Fellowship Leave within the 2024-25 academic year:
☐ Fall Semester
☐ Spring Semester

Course(s) that will need to be covered by other faculty (including part time faculty). Please include course number, course name, and number of credits

1. __________________________________________________________________________

2. __________________________________________________________________________

3. __________________________________________________________________________

__________________________________________  ______________
Faculty Signature               Date