**Supervisor Check-ins**

*(Supervisor, use this as a reminder to check in with your direct report who is on sabbatical. Staff are encouraged to check in with their supervisor once per phase.)*

|  |  |
| --- | --- |
| Staff’s Name |  |
| Staff’s E-Mail |  |
| Staff’s Phone |  |
| Current Ministry Location |  |
| Sabbatical Advisor |  |
| Sabbatical Start Date |  |
| Estimated End Date |  |

|  |  |  |
| --- | --- | --- |
| **Sabbatical Dates** | **Supervisor Check-ins**  **Date occurred** | **Notes/Comments** |
| Phase 1:  Release/Relinquish |  |  |
| Phase 2:  Rest/Recovery |  |  |
| Phase 3:  Reflection/Refocus |  |  |
| Phase 4:  Realignment/Reassignment |  |  |
| Phase 5:  Re-Engagement/Re-Entry |  |  |
| Re-Engagement/Re-Entry tasks |  |  |