**Extension of Probationary Period Application Form**

Requests should be submitted to the department chair during or in advance of the academic year or semester in which the extension is justified, but no later than the spring semester (May 31) of the fifth year in rank as Assistant Professor.

*Extensions are for one academic year.  In certain circumstances and in accordance with policy, a second year’s extension may be granted.*

Extension of the Probationary Period is automatic for childbirth or adoption, upon formal notification of the department. The chair is required to notify the dean who, in turn, forwards the request to the Office of the Provost. In all instances other than childbirth, Extension of the Probationary Period is never automatic. The faculty member is responsible for providing appropriate documentation regarding personal circumstances that have led to this request for extension of the probationary period.

Reason for request to extend probationary period:

1. Childbirth or Adoption: Year \_\_\_\_\_ Semester \_\_\_\_\_

2. Other: \_\_\_\_ *Please give reasons. Attach additional pages and supporting documentation if necessary.*

Requested extension year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and EID (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(signature): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*For reasons other than childbirth or adoption:*

Budget Council Recommendation: For \_\_\_\_\_ Against \_\_\_\_\_ Abstain \_\_\_\_\_

Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Sign and date*