** TENURE CLOCK EXTENSION REQUEST**

 **Faculty Member Name:**

 **Current Rank:**

 **Department:**

 **Date of initial appointment on the tenure track:**

* **CHECK THE APPROPRIATE BOX BELOW AND ATTACH THE REQUIRED DOCUMENTATION.**

 **[ ]  Birth or Adoption of a Child** *(Attach copy of birth certificate or adoption papers. Letters are not required.)*

**[ ]  Extenuating Circumstances** *(Attach letters from faculty member and chair. See procedure below.)*

It is required that faculty members document serious and unanticipated events that have intervened in the completing of the normal probationary period. Leave taken under the Family Medical Leave Act (FMLA) does not automatically result in the interruption of the probationary period. This request must have full approval of the Department Chair, School of Medicine Executive Dean, and the Vice Chancellor for Academic Affairs.

* **KBOR POLICY**

(Faculty Handbook, April 2016, pg. 51 b-f)

The “tenure clock” may be delayed by one year for the birth, adoptive placement, or adoption of a child under age 5 prior to May 1st

of the fifth year of the probationary period. **Notification must occur within 90 days of the birth** to the institution’s chief academic officer. Faculty retain the right to opt out of this interruption policy.

The “tenure clock” may be extended by one year prior to the sixth year for unexpected special and extenuating circumstances per request of the faculty member and appropriate dean to the chief academic officer.

No more than two extensions of the “tenure clock” may be granted to a faculty member for any reason.

In exceptional cases, the chief executive officer may hire faculty members with tenure without their having completed a probationary period.

Tenure shall not be de facto awarded based on the length of time a faculty member has been on the tenure track. Adherence to this policy is a necessary condition precedent to tenure.

* **PROCEDURE FOR EXTENUATING CIRCUMSTANCES**
1. ***Faculty Member:***  Write a letter to the department chair detailing the circumstances for the extension request.
2. ***Faculty Member:***  Complete, sign and date the Tenure Clock Extension Request form.
3. ***Department Chair:*** Sign and date the Tenure Clock Extension Request form from the faculty member. Upon approval, write a detailed letter in support of the extension request.
4. ***Faculty Member or Department Administrator:*** After department signatures, send the form and letters to Faculty Affairs and Development for further signatures by the School of Medicine Executive Dean and the Vice Chancellor for Academic Affairs.

The Mid-Cycle Comprehensive Review should be conducted at the originally scheduled date when granted an extension unless other arrangements are approved.

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| * **APPROVALS**
 |  | **Signatures** | **Date** |
| **Faculty Member** |  |  |  |
| **Department Chair** |  |  |  |
| **Reviewed by****Senior Associate Dean for Faculty** **Affairs and Development (FAD)** | Dianne Durham, PhD |  |  |
| **SoM Executive Dean** | Akinlolu O. Ojo, MD, PhD, MBA |  |  |
| **Vice Chancellorfor Academic and Student Affairs** | Robert M. Klein, PhD |  |  |

Reviewed 1.18.2024