



Request to Extend the Probationary Period
(Extending the Tenure or Continued Appointment Clock)
Office of the Provost
Revised: 03/31/2020

A one-year probationary period extension shall be automatically granted to either parent (or both, if both parents are tenure-track or continued appointment-track faculty members) in recognition of the demands of caring for a newborn child or a child under five and newly placed for adoption or foster care. The request should be made within a year of the child's arrival in the family.

An extension of the probationary period may also be approved on a discretionary basis for other extenuating non-professional circumstance that have had a significant impact on the faculty member's productivity, such as a serious personal illness or major illness of a member of the immediate family. Documentation of medical reasons is required and should be submitted with this request. In rare cases, extraordinary professional circumstances not of the faculty member's making may be acceptable justification for a probationary period extension. The COVID-19 pandemic has disrupted professional accomplishments; requests based on this disruption do not require further justification or documentation.

If the department head does not support this request, the reasons for denial shall be provided in writing, and the request is automatically forwarded to the dean for further review. If the dean does not support this request, the reasons for denial shall be provided in writing, and the request is automatically forwarded to the provost for further review.

Faculty member and Virginia Tech ID number

Department and mail code

Current mandatory tenure or continued appointment review year

If a previous probationary extension has been received, indicate the date

Extension of the tenure or continued appointment probationary period for a new parent (childbirth, adoption, foster care) is automatic. Indicate the date of the child's birth, or the date when a child under the age of five years was newly placed for adoption or foster care.

Check this box if your extension request is based on the COVID-19 pandemic; no further narrative is required.

Other reason(s) for extending the probationary period. Please specify circumstances. You may attach additional narrative.

Faculty member's signature

Date

Approvals:

Approved

Not Approved

Department head signature

Date

Department head name (please print)

Approved

Not Approved

Dean signature

Date

Approved

Not Approved

Executive Vice President and Provost signature

Date

To be completed by Office of the Provost

New tenure or continued appointment review year: _____

Final year, if tenure or continued appointment is not awarded: _____