

This form should be used to request an extension of an academic year (AY) faculty, who is already appointed to a 10-, 11-, or 12-month contract. The faculty member must continue to provide assurance of funding to cover the full cost of salary plus full fringe benefits for the one, two, or three additional months of the proposed appointment. The source of such funds must be sponsored grants and contracts (excluding indirect or overhead) in accordance with Policy No. 6200, Policy on Research Extended Appointments.

The requirement for sufficient sponsored funding to support the additional month or months of salary and fringe benefits may be met by sponsored-salary charges **any time** during the appointment period (August 10 – August 9); not just during the summer. Because other university responsibilities, vacation, participation in conferences, and other non-project related work may occur during the summer months, faculty members should always have a portion of their time charged to a non-federally funded source, rather than charge summer salary at 100% to sponsored projects. Some salary charges to sponsored projects may take place during the academic year (August 10 – May 9). In all cases, salary charges should reflect **actual** effort related to the project.

This signed request should be submitted to the Provost’s Office by August 10 for the subsequent summer. In situations where the faculty receive sponsored funding after August 10 and want to change their appointment, the documentation (this form, a letter of support and documentation of funding from the department head and a P3AF) must be provided to the Provost’s Office by the following **March 10** to be effective for the upcoming summer. If the sponsored funding should not be sufficient to cover the summer commitment, it will be the responsibility of the department to cover the shortfall with indirect/overhead until August 10, when the appointment can be converted back to a level consistent with the availability of sponsored funding. I am requesting:

- (1) to **continue** my current appointment as (mark one option below), or
- (2) to **change** my current appointment to (mark one option below).
 - 10-month appointment (August 10-June 9) (Base AY salary x 1.11111)
 - 11-month appointment (August 10-July 9) (Base AY salary x 1.22222)
 - 12-month appointment (August 10-August 9) (Base AY salary x 1.33333)

Name: _____

Last 4 digits of Virginia Tech ID Number: _____

Department name and #: _____

Current AY Salary: _____

Converted Salary: _____

Effective Date: _____

**Source of funding
(name of project and fund #):** _____

I certify that sponsored funding is available for: 1 year, or 2 years.

Faculty signature Date

Approvals:

Department Head signature Date
Confirms departmental support and documentation of funding available for this appointment

Dean signature Date

Executive Vice President and Provost signature Date

Please submit this completed form to Faculty Affairs (facultyaffairs@vt.edu) for review and approval by the Office of the Executive Vice President and Provost.