

2020- AUTOMATIC NOTIFICATION OF EXTENSION OF TENURE CLOCK DUE TO COVID-19

Name _____ Employee ID _____

TIU _____ College _____ Campus _____

Date of appointment at tenure-track faculty rank _____ Date of request _____

If not yet completed, are you requesting moving your Fourth Year Review? _____

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This form is forwarded to opt-in for the 2020 automatic extension of my mandatory review so that the department, college, and university records can be updated. Per policy, I understand that I may request a non-mandatory review following the policy and procedures laid out in my unit's Appointments, Promotion and Tenure document.

Once completed, please submit this form by email to Regional Campus Dean/Director (if applicable) or TIU Head.

DATE

Faculty Member _____

Regional Campus Dean/Director (if applicable) _____

TIU Head _____

College Dean _____

Provost _____

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The Office of Academic Affairs will return a copy of this form to the college acknowledging receipt of the form.

To be filled out by the Office of Academic Affairs

	PRESENTLY SCHEDULED	PROPOSED
Fourth Year Review, if not yet completed	8/15/___	8/15/___
Mandatory promotion & tenure review	8/15/___	8/15/___