



Clemson University

Tenure Clock Extensions

Request for an Extension of Tenure Probationary Period

Updated: Fall 2021

This form provides the mechanism for faculty to apply for an extension to their tenure probationary period. The completed form should be sent by a faculty member's Dean's Office to the Provost's Office at APFA@clemson.edu. Notification of approval will be sent to the requester, department/school chair/director and dean. To provide time for review and approval before the next TPR review cycle year process begins (in particular, the 'Promotion and/or Tenure Precheck'), it is recommended that faculty submit these requests by March 1 of each year.

Name: Department/School:

Title: College:

CU ID: Campus Address:

Employee ID: Email Address:

Hire date for first year of tenure position:

Penultimate academic year prior to proposed extension:

"New" penultimate year requested (one-year extension):

Reason for extension request. If additional space is needed, please add documents as an Adobe Portfolio.

For more information, please see <https://helpx.adobe.com/acrobat/using/create-customize-pdf-portfolios.html>

I understand the conditions associated with the granting of my request of an extension to my probationary period and accept that approval of this request does not render an automatic granting of tenure and does not provide an indication that I am on track to be granted tenure. I also understand that I will not have a claim on tenure if no action is taken on my promotion/tenure status by the newly-established penultimate year.

Faculty Signature, Date

Department Chair/School Director, Division Lead,

TPR Committee Chair, Dean and Provost complete the section below

By signing below, I either approve or deny the extension of the probationary period. **Please provide justification for the decision in the text box above the signature.** If additional space is needed, please add documents as an Adobe Portfolio. <https://helpx.adobe.com/acrobat/using/create-customize-pdf-portfolios.html>

Division Lead (if Applicable)

Approve:

Deny:

Comments:

Division Lead Signature, Date

Department Chair/School Director

Approve:

Deny:

Comments:

Department Chair/School Director Signature, Date

TPR Chair

Approve:

Deny:

Comments:

TPR Chair Signature, Date

Dean

Approve:

Deny:

Comments:

Dean Signature, Date

Provost

Approve:

Deny:

Comments:

Provost Signature, Date