

**WEST VIRGINIA UNIVERSITY
REQUEST FOR EXTENSION OF THE TENURE CLOCK OPT-OUT
BOARD OF GOVERNORS RULE 4.5**

Name: _____

Rank: _____

Department: _____

College/School: _____

Date of first appointment to the tenure-track position: _____

Critical year specified in initial appointment letter: _____
Please attach a copy of that letter.

Critical year specified in subsequent modifications of initial appointment, if any: _____
Please attach a copy of any modification letters.

_____ **Opt-Out of a one-year extension of the tenure-clock for exceptional professional circumstances. Please send a copy of the signed form to cmstaples@mail.wvu.edu.**

I have read BOG Rule 4.5 and understand and agree to the provisions applying to my request. For these purposes, I understand that I will continue as a 1.00 Full-Time Equivalent faculty member.

BOG Rule 4.5 allows up to three extensions prior to your critical year. It also states that "An extension of the probationary period in no way limits the right of the University to terminate a probationary appointment prior to a faculty member's critical year, should circumstances warrant such action."

In signing this, you are acknowledging that the change in your critical year does not result in automatic or de facto tenure. Your review during your critical year will be that normally conducted for faculty members seeking an award of tenure.

Signature

Date

This request has been approved. The faculty member's critical year will remain be _____.

Provost/Vice President Signature

Date