

Tenure-Clock Extension Policy, Procedures and Guidelines

(Presented at Faculty Senate, January 2007)

Purdue University recognizes the importance of providing a workplace that enables faculty to do their very best work. The university also recognizes that faculty may encounter circumstances which impair or prevent progress toward professional and scholarly achievement. This is an especially critical issue for faculty working toward tenure within a limited and specified timeframe. This policy provides faculty the opportunity to seek an extension of the tenure clock when certain situations arise that slow or hinder achieving tenure.

Background: The University tenure policy (Executive Memorandum B-48, Section II) states that justifiable conditions or interruptions may be considered as a basis for deviations from the traditional probationary tenure clock. Furthermore, the policy grants the University discretion in determining what kinds of conditions shall be deemed justifiable. The President has delegated the authority to approve tenure-clock extensions for justifiable conditions to the Provost.

To ensure consistency and fairness in determining which conditions are sufficiently justifiable to warrant deviation from the tenure policy, the following guidelines are recommended:

1. A one-year *automatic* approval will be granted for birth of a child and adoption, provided a Request for Tenure-Clock Extension form is submitted within one year of the occurrence and prior to the penultimate year. This provision applies to either or both parents.
2. When conditions and personal circumstances arise which substantially interfere with progress toward achieving tenure, faculty may request that time be excluded from their probationary periods. Justifiable conditions for granting exclusions include, but are not necessarily restricted to, severe illness, disability, or caregiving of a family member.
 - a. Ordinarily, requests for tenure-clock extensions are for one year.
 - b. Requests for exclusions should be made within one year from the time the conditions occurred which precipitated the request.
 - c. Exclusions will not be granted after the beginning of the penultimate year.
 - d. Requests for exclusions will be reviewed by the Provost upon receipt.
 - e. Decisions regarding the granting of exclusions shall be based upon:
 - 1) verification that the conditions leading to the request occurred or continue to exist.
 - 2) verification that the faculty member demonstrated progress prior to the conditions leading to the request.

- f. Deans and department heads have a responsibility to inform faculty of this policy, especially upon recognition that a qualified faculty member's progress toward tenure may be impeded by circumstances cited within this policy. Furthermore, faculty members are encouraged to discuss this policy with their head when qualifying circumstances arise or are anticipated.
3. When a tenure-clock extension is approved during the expenditure period authorized for a start-up package, the "must be spent by" date of the start-up funds will be extended by the time equivalent to the tenure clock extension.
4. Procedures for initiating, reviewing, and approving requests to exclude time from the probationary period are as follows:
 - a) Faculty should submit a Request for Tenure-Clock Extension form to the department head.
 - b) The department head shall transmit the request to his/her dean. The department head and/or dean is responsible for ascertaining that the request is valid.
 - c) If the dean approves the request, he/she will forward it to the Provost, who will act upon it.
 - d) Revised President's Office Form 19 should be processed to reflect the change in the end of the maximum probationary period.
 - e) Any faculty member who feels it necessary to appeal a decision may utilize established grievance procedures.

Request for Tenure-Clock Extension

Name: _____

Department: _____

College/School: _____

Campus address: _____

Phone/email: _____

Tenure-clock start date/penultimate year: _____

Duration of request (e.g., 1 year): _____

“New” penultimate year requested: _____

Rationale for request:

(If request is for childbirth or adoption, send this form directly to the Provost office.)

I understand the conditions associated with the granting of my request for an extension of the tenure clock and accept the extension as an arrangement which does not render an automatic granting of 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.

Signature Date

Approvals:

Department Head Date Dean Date

Head/Dean comments (optional):

Approved:

Provost Date

Notification of approval will be sent to the Requester, Dean, Department Head, Director of Financial Affairs and Provost Business Office.

PURDUE UNIVERSITY
FACULTY EXTENSION

Campus: Select One

Type of Appointment: Extension/Change Personnel No. (If Extension or Change) _____

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Last

First

MI

Organizational Unit Name:	FTE:
Position Title:	
Organizational Unit Name:	FTE:
Position Title:	
Organizational Unit Name:	FTE:
Position Title:	

PERIOD OF APPOINTMENT: BEGIN DATE: (month/day/year) _____ END DATE: (month/day/year) _____

End Signifies: Select One

ANNUAL RATE OF PAY FOR THIS APPOINTMENT \$ _____ on an Select One year basis
(budget year _____)

or
CASH RATE OF PAY FOR THIS APPOINTMENT \$ _____

Are there any other agreements affecting the terms and conditions not covered by this document? Select One
If "Yes", note terms and conditions or attach documentation of these agreements and list all document(s) attached.

ATTACHMENTS/COMMENTS: 1. _____
2. _____
3. _____

FACULTY TENURE STATUS: (Check One)

Extension/change in Tenure status: Select One (Reference Tenure date below if applicable)

Explain (if applicable): _____

Date Tenured/day following end of maximum probationary period: (month/day/year) _____

Are there any conditions regarding Tenure: Select One. If "Yes", note conditions or attach documentation of these conditions.

ATTACHMENTS/: 1. _____

COMMENTS 2. _____

Except as noted above, your appointment is subject to all Purdue University policies, as they may be amended from time to time, including but not limited to the policies specifically incorporated into your offer letter.

AGREED: _____ (Date) _____ (Date) _____ (Date) _____ (Date)
(Appointee) (Date) (Org. Unit Head) (Date)

RECOMMENDED: _____ (Date) APPROVED: _____ (Date)
(Vice President/Dean/Vice Chancellor/Director) (Date) (President or Designee) (Date)