

**Office of the Provost
Governing Regulations XB1c: Automatic Delay of Probationary Period
Faculty Tenure Delay Form (TDF)**

Name: _____

Employment Status (Check One): Regular Extension Librarian Special Title

College: _____ Department: _____

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Please check the appropriate box below and follow the procedures as explained on the Delay of Probationary Period Procedures checklist found online:

https://www.uky.edu/ofa/sites/www.uky.edu.ofa/files/uploads/Delay_procedures.pdf

A. Becoming a Parent (Automatic Extension)

I acknowledge receipt of the automatic one-year extension of my tenure clock for birth of a child, adoption or guardianship.

B. Waive Automatic Extension

I waive my right to be granted a one-year extension of my tenure clock ordinarily granted with the birth, adoption, or guardianship of a child.

C. Significant Responsibilities for the Care of a Relative or Domestic Partner

I request a one-year extension of my tenure clock because I have assumed significant responsibilities related to dependant care obligations of a relative (GR X.A.1) or domestic partner.

THIS SECTION SHOULD BE COMPLETED BY THE DEAN'S OFFICE:

Original Probationary Period Start Date: _____

Original Probationary Period End Date: _____

Revised Probationary Period End Date: _____

..... UNIVERSITY OF KENTUCKY

Faculty Member Signature Date

Department Chair Signature Date

Dean Signature Date

Provost Signature Date

(Applies Only to Section C)

*(Denials require written justification)

Approve *Deny

Approve *Deny

Approve *Deny

Submit this Faculty Delay Tenure Form with a revised Notice of Academic Appointment Form