THE UNIVERSITY OF MAINE 1865

Notification: Stopping the Tenure Clock
for purposes of childbirth, childrearing, or adoption

Per article 9(B)(3)(a) of the AFUM contract, in instances of (a) childbirth, (b) child rearing, or (c) adoption, faculty members may notify the administration of a one-year extension of the probationary period.

- The probationary period may be extended more than once during the probationary period. However, the total of all extensions under Article 9 (B)(3)(a) and (b) may not exceed two years.
- Stopping the tenure clock does not change the timetable or cycle for future reappointments as described in Article 7 of the AFUM contract.

A faculty member who wishes to extend the probationary period on account of childbirth, child rearing, or adoption shall complete this form and submit it to the (a) peer committee, and (b) the unit or department's chair or director, (c) who must then review and submit to the appropriate dean's office, (d) who must then route to the Provost's Office for final notification. The faculty member must complete this form and forward it to the peer committee and appropriate department chair or director on or before September 1 of the academic year in which the extension will apply.

Faculty members considering an extension of the probationary period are also encouraged to contact the Offices of Equal Opportunity and Human Resources to investigate whether other University policies and or state/federal laws may apply under the circumstances.

All entities must review the completed application.

Name:

Department/Unit:

College:

Period of Tenure-Clock Extension:

Reason for Extension:

Begin date: End date:

Applicant's signature** _____ Date _____

** *Faculty Applicant <u>must</u> forward a copy of this form with sections above this line completed to the Office of EQUAL OPPORTUNITY, 101 North Stevens Hall.*

Chair/Director	Peer Committee	Dean	Provost
☐ Reviewed	☐ Reviewed	☐ Reviewed	☐ Reviewed
_____	_____	_____	_____
Signature	*Signature : Committee Chair*	*Signature*	*Signature*
_____	_____	_____	_____
Date	*Date*	*Date*	*Date*