



COVID-19 Extension Opt-Out Request Form

(See COVID-19 Tenure and Appointment Clock Extension Policy in the Faculty Handbook: <http://facultyhandbook.stanford.edu>)

TO BE COMPLETED BY THE FACULTY MEMBER: *Please fill out this form and submit it as an email attachment to your Department Chair, with copies to your Dean and school Faculty Affairs Administrator*

Name: _____

Title: _____

Department/School: _____

- I am opting out of the COVID-19 one year clock extension and understand that my original tenure deadline/ promotion or reappointment term date will remain unchanged.

Signature: _____ Date of Request: _____

(Click to e-sign)

TO BE COMPLETED BY THE SCHOOL DEAN'S OFFICE:

Please submit to Lynn Dixon at ldixon@stanford.edu in the Provost's Office, Faculty Affairs

Date Received : _____

Current Term End Date: _____

Current Tenure Deadline (for Tenure-line Faculty) Date: _____