FSU | OFFICE OF FACULTY DEVELOPMENT & ADVANCEMENT

AY 26-27

Post-Tenure Review Postponement/Ineligibility Request Form

Instructions: Complete the form below to request **either** postponement (Option A) **or** ineligibility (Option B) and return the completed form to: **FDA-Faculty@fsu.edu**

Name: _____ EMPLID: _____

Department/School: _____

College: _____ Title: _____

Tenure date: _____ Date of last promotion: _____

Option A. Reason for requesting postponement for one year may include extenuating circumstances such as being on approved extended leave, being on sabbatical, or having had significant administrative duties (e.g., associate dean, chair, school director) within the last 5 years. Please explain below.

Option B. Requesting ineligibility due to retirement or departure from the university in the 2026-2027 academic year requires that a resignation letter with date of resignation or retirement be on file with the college. Please explain below.

Faculty Signature_____ Date: _____

Approve ☐ Do Not Approve ☐

Provost (or designee) _____ Date: _____