



Visiting/Time-Limited Extension Request Form

A&P

USPS

Faculty

Date of Request:

Position Title & Position Number:

Current Expiration

Length of Time

Date of Appt:

Requested as an Ext:

Employee Name & Emp ID

Submitted by:

Department/College:

Division:

Reason for Extension: (Please use attachments if necessary)

Explain the specific reason for the extension, including a detailed description of the function and duties of this position and the direct impact of not extending this appointment on core and essential business operations.

Detail the responsibilities that cannot be performed by other staff or faculty members.

If the expiration date of the appointment is less than three (3) months from the date of this request, explain why a search was not launched and/or completed prior to the hiring freeze announcement (4/1/2020). If a search was launched but not completed, please identify when the position was posted and the status of the search at the time of the hiring freeze announcement.

Approval Signatures:

Hiring Manager Signature

Dean/Vice President Signature

Renee Grigor, Director of Talent Acquisition

Nancy Myers, Director of Office of Institutional Equity

Approved

Denied

Comments:

Please submit Extension Request form to HRexceptions@ucf.edu