MARSHALL UNIVERSITY

NINE-MONTH FACULTY REQUEST FOR MODIFIED DUTIES

Marshall University recognizes that personal-life situations may arise that could cause nine-month faculty, who do not accrue sick leave or annual leave, to request short-term modification of assigned duties. Such situations would include parental responsibilities for a newborn or newly adopted child, care for an elderly parent, illness of the faculty member or someone in the immediate family, or other identified catastrophic situations. To allow the faculty member the flexibility to attend to these situations, he or she may request a modification of assigned duties for one semester with no reduction in salary or benefits. Further, upon consultation with the department chair and college dean, and depending on individual circumstances, a nine-month tenure track faculty member may request an extension of the probationary period by one academic year.

Faculty Member: _____

Department:	
Requested period of modified duties:	
Reason(s) for modified duties:	
Faculty Member Signature	Date

Step 1: Certification

Proposed use of funds:

Human Resource Services Certification:	
HR Director Signature	Date
Step 2: Justification/Funding Request	
Please <u>attach</u> a plan of proposed activities chair/division head and the dean.	, developed in consultation with the
Funding requested by Department Head to supp	oort this request: Amount: \$

Step 3: Approval

Approved Not Approv	Chair/Division Head /ed *		Date
Approved Not Approv	Dean /ed*		Date
	, ou		
Approved	Provost		
□ Amour	nt approved by Provost: \$_	Date	
Not Approv	/ed	24.0	

*If the chair/division head does not support this request, the reasons for denial shall be provided in writing, and the request automatically forwarded to the dean for further review. If the dean does not support this request, the reasons for denial shall be provided in writing, and the request automatically forwarded to the provost for further review.