

TO: Tampa Campus Employees: | Sarasota Campus Employees: | St. Pete Campus Employees:
Submit via [email](#). | Submit via [email](#). | Submit via [email](#).

FROM: Name _____ Ext. _____ Title _____
College/Div. _____ Dept. _____

Employee's Name _____ **ID #** _____ **Class Title** _____

Note: For information on extending a probationary period, refer to the USF CHR/Employee Relations webpage ([Probationary Employees](#)). If an employee has regular status in another Staff class, he/she cannot be terminated during the extended probationary period without approval from CHR. Please reach out to Employee Relations for such inquiries, at employee-relations@usf.edu.

Number of calendar days or months for extension: _____ Days _____ Months

Reason for extension:

- Substandard performance evaluation** with less than overall Meets Expectations rating (extension must be same number of calendar days or months as period covered by overall substandard rating)
- Additional time for training or on-the-job experience**
- Approved leave of absence** (with or without pay) for at least 30 consecutive or non-consecutive days
- Request by supervisor or employee due to change in assignment** to different position in same class (signature of employee required below)
- Mutual agreement between supervisor and employee** (signature of employee required below)
- Other** (in consultation with CHR): _____

Justification for extension: _____

Supervisor's/Rater's Signature Date

Dean's/Director's/Designee's Signature Date

Employee's Signature (if applicable) Date

Note: Notification must be received by employee prior to initial probationary end date.

Confirmation by CHR of new probationary end date and evaluation period:

Previous end date _____ New end date _____ New evaluation period _____ to _____

Additional information _____

CHR Representative's Signature Date

GEMS entry date _____ Initials _____

Original to: Personnel File Copy to: ___ Supervisor/Rater ___ Dean/Director/Designee ___ Employee