 

REQUEST FOR EXTENSION OF APPOINTMENT FORM

Department / Division: Click here to enter text.

Dept. HR. Representative: Click here to enter text. Phone: Click here to enter text.

Postdoc Name: Click here to enter text. PID: Click here to enter text.

Original Appointment Date: Click here to enter a date.

Date Extension will End: Click here to enter a date.

Name of Person Requesting Extension (PI or Mentor): Click here to enter text.

Justification for Request (To be Completed by Mentor):

Click here to enter text.

I hereby agree that this postdoc appointment will not extend beyond the date requested above.

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Faculty Mentor Department Chair/Director/Dean

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Postdoc Vice Chancellor for Research

Please submit form to the Office of Postdoctoral Affairs Human Resources at [opahr@unc.edu](mailto:opahr@unc.edu).