

Postdoctoral Scholar Exception Justification Form

Scholar Name

☐ **Beyond 5th Year** # Years at UCSD

Reason

Article 2:
Specify unusual
circumstances that
justifies exception

☐ **Reduced Percentage** %

Reason

Article 25:
Specify reduction
in hours and
concomitant of
responsibilities

☐ **Less than Two Year Reappointment**

Reason

Article 2: Specify
circumstances for
less than two year
appointment

Requested and concurred by:

Scholar Name, Signature and Date

Supervisor Name, Signature and Date

For Office of Postdoctoral Scholar Affairs use only:

☐ Approved

☐ Declined

Decision
Comments

Division of Graduate Education and
Postdoctoral Affairs Dean