DATE

POSTDOC’S LEGAL NAME &

MAILING ADDRESS

Dear NAME:

I am pleased to offer you a continuation of your employment at the University of Connecticut. Unless you are advised to the contrary in writing, your last day with us will be the end date listed below.

|  |  |
| --- | --- |
| Job Title |  |
| Department |  |
| School/College/Division |  |
| Executive Division |  |
| Principal Investigator/Supervisor |  |
| Building Location |  |
| Grant Funded (Y/N) |  |
| Appointment Term |  |
| Percent Employed |  |
| Full-Time Annual Salary | $ |
| Start Date |  |
| End Date |  |
| Union Info | <https://uconnpostdocunion.org/> |

Your current benefit elections will continue unchanged. Please contact the Employee Benefits Department at benefits@uconn.edu or (860) 486-3034 should you have any questions. Your University Network Identifier, known as a Net ID, will remain the same.

The International Student and Scholar Services Office (ISSS) supports the greater internationalization of the University of Connecticut through the development and delivery of services and programs that help our international students, scholars, faculty and staff accomplish their academic and professional goals at UConn. ISSS may be reached by phone at (860) 486-3855 or by email at international@uconn.edu.

We discussed a work schedule of **{insert schedule},** and there may be additional hours on occasion.

The duties and expectations of this appointment are consistent with our previous discussions and remain subject to adjustment, in accordance with University policy. Specifically, **{insert a** **brief summary of the general nature of required duties and anticipated research project(s)}**. If you have questions or require additional information regarding this appointment, you may contact **{Name of hiring unit person and contact information}** within the department of {Department name}. In addition, you will continue to have the opportunity to develop and discuss an Individual Development Plan with your PI.

Other rights and terms and conditions of your appointment are contained in the collective bargaining agreement between the University of Connecticut and the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (UAW), Local 6950. A copy of the collective bargaining agreement may be found on the Labor Relations website: [https://hr.uconn.edu/labor-contracts-unions/](https://hr.uconn.edu/labor-contracts-unions/.%20). Additional information is available on the Union’s website at: <https://uconnpostdocunion.org/>.

**[Licensure needed, if applicable]** Your position requires that you have a current and active **{Specify licensure or certification}** as a \_\_\_\_\_\_\_. This requirement continues throughout your employment in this capacity and loss of this important credential may jeopardize your continued employment. It is your responsibility to advise us of any change in the status of your license.

UConn is Connecticut’s only public research extensive university, a prestigious designation that rests firmly on the institution’s commitment to the unfettered pursuit of knowledge through research, teaching, and outreach. You are a part of a University in which diverse views are welcomed and respected even as we work together to advance our academic mission and to effect constructive change. We are delighted that you will be continuing with us.

Please indicate your acceptance of the offer by signing below and returning one copy of this letter no later than five business days from the date you received the letter.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor signature Date

I agree to the terms described above and agree to abide by all University policies including, but not limited to, the [University’s Code of Conduct](https://policy.uconn.edu/2011/05/17/employee-code-of-conduct/) and the [State Code of Ethics](https://policy.uconn.edu/2011/05/24/guide-to-the-state-code-of-ethics/). I also acknowledge that if I fail to arrive in the United States prior to the start of my appointment or depart prior to the end of my appointment without permission from my supervisor, the terms and conditions of my employment could be impacted accordingly.

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Postdoc signature Date

Policies for review at <http://policy.uconn.edu>:

“Code of Conduct” Guide: <http://policy.uconn.edu/?p=140>

“Non-Discrimination” Policy: [https://policy.uconn.edu/?p=145](https://policy.uconn.edu/2015/12/29/policy-against-discrimination-harassment-and-related-interpersonal-violence/)