APPLICANTFNAME APPLICANTLNAME

APPLICANTSTREET1

APPLICANTSUBURB, APPLICANTSTATE APPLICANTPOSTCODE

Dear APPLICANTFNAME:

I am pleased to offer you employment at the University of Connecticut. Please review the information below that outlines the principal terms of your employment at the University.

|  |  |
| --- | --- |
| Job Title | JOBTITLE |
| Department | JOBSUBDEPARTMENT |
| School/College/Division | JOBDEPARTMENT |
| Executive Division | JOBBRAND |
| Supervisor | SIGNEDBYFNAME SIGNEDBYLNAME |
| Building Location | SITETITLE |
| Appointment Term | GENERIC\_APPOINTMENT\_ |
| Percent Employed | JOBSUPPLEMENTARY4 |
| Full-Time Annual Salary | $OFFERSUPER |
| Start Date | OFFERSTARTDATE |
| Retirement Election Deadline | OFFERSTARTDATE |
| Orientation Date | OFFERSUPPLEMENTARY\_DATE01 |
| Health Benefits Enrollment Deadline | 31 Days after OFFERSTARTDATE |
| Anticipated Probationary Period End Date | OFFERSUPPLEMENTARY\_DATE02 |
| Union Info | [www.ucpea.org](http://www.ucpea.org) |

You will receive the first biweekly paycheck two weeks after the close of the pay period in which you are hired, contingent upon all required documentation being in place.

This offer of employment is contingent upon successful completion of a criminal background check, and your continued employment is conditional upon the timely completion of an approved I-9 (Employment Eligibility Verification Form). If you do require assistance in extending or obtaining work authorization at the University of Connecticut, please contact your department immediately.

If you accept our offer, you will soon receive a communication from the Department of Human Resources about several important topics, including Orientation, selecting a retirement plan prior to your first day of employment, and securing your University Network Identifier (NetID). If eligible for health insurance, coverage will become effective on the first of the month following your date of hire provided the enrollment process is completed within the initial 31 days of employment.

The duties and expectations of this appointment are consistent with our previous discussions and remain subject to adjustment, in accordance with University policy.

During your interview, we discussed a work schedule of 35 hours per week working Monday through Friday. Your daily schedule will be confirmed prior to your start date. There may be additional hours on occasion. Given the nature of our operation and the potential for program expansion, your days and hours of work may have to be changed in the future and you should anticipate this possibility as a condition of employment. Any changes to your regular work schedule will be made in accordance with the terms and conditions of your collective bargaining agreement.

As a condition of this offer, one year from the time of initial employment will be your probationary period. Per Article 20.3 (UCPEA Contract), you will be evaluated approximately halfway through and at the end of your probationary period. Please utilize this time effectively to ensure your understanding of the position requirements.

Other rights, terms and conditions of your employment are contained in the collective bargaining agreement between the University of Connecticut and the University of Connecticut Professional Employees Association (UCPEA). A copy of the collective bargaining agreement may be found on the UCPEA website at: [www.ucpea.org](file://uconn/efs/HR/EMPLOY2/Offer%20Letters/REGULAR%20PAYROLL%20Offer%20Letters/UCPEA%20%28Permanent%29/www.ucpea.org).

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 joining 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 joining us.

Please indicate your acceptance of the offer electronically no later than five business days from the date you received the letter.

Sincerely,

SIGNEDBYFNAME SIGNEDBYLNAME

**{Supervisor’s Title}**

By accepting this appointment electronically I agree to the terms described above and 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/).

Policies for review:

[Code of Conduct](https://policy.uconn.edu/2011/05/17/employee-code-of-conduct/)