**Last Updated: February 13, 2024**

**Instructions:**

1. Use this template for In-Unit Non-Tenure Faculty only.
2. For appointment requirements visit: [Overview of Appointments](https://hr.ufl.edu/manager-resources/recruitment-staffing/hiring-center/advertising-the-job/overview-of-appointments/)
3. Letter must be printed on official UF letterhead.
4. Remove language from header and footer.

[Insert date]

Dear NAME:

On behalf of the University of Florida, welcome and congratulations! We are pleased to extend an invitation to you to join the faculty of the Department of NAME.

Your appointment will be as a <CLASSIFICATION TITLE> (PS #xxxxxxxx) with the Department of <NAME> in the College of <NAME>. This is a full time (1.00 FTE), nine-month/twelve-month, non-tenure accruing position. Your salary will be $###, at a biweekly rate of $####. Your appointment period is <DATE through DATE>.

**Job Responsibilities**

As discussed during your interview, the principal duties and responsibilities assigned to this position are <job duties from position description here>.

**Pre-employment Screening**

We are excited you are joining our team. As part of the hiring process, a successful pre-employment screening must be completed for the offer of employment to take effect. This includes a satisfactory review of criminal records, reference checks, verification of education, and any health assessments that may be required.

**Official Transcripts**

In addition to education verification, an official transcript of your highest degree must be submitted by **MM/DD/YYYY.** The official transcript may be delivered in a sealed envelope to **XXXXXX** or emailed directly from the institution to **xxxxx@ufl.edu**. Degrees acquired from a non-U.S. institution must be evaluated by an education credentialing agency approved by National Associations of Credentialing Evaluation Services (NACES).

**Employment Paperwork Requirements**

As a federal contractor, the University of Florida (EIN 59-6002052) is required to verify the identity and work authorization of all new employees. To help us comply with federal requirements we ask you,

* complete Section 1 of Form I-9 on or prior to your first day of employment.
* present documents that verify your identity and work authorization within the first three business days of your start date.

Failure to provide the appropriate documentation by the end of the third business day as required by law may lead to termination of employment.

**Conditions of Appointment**

All UF appointments are subject to university regulations and policies. Regulations and policies that may affect your employment are reviewed on an ongoing basis. To ensure that you are aware of the most current regulations and policies, please regularly visit the Regulations website at <https://policy.ufl.edu/> and the Forms and Policies website <https://hr.ufl.edu/forms-policies/>. The State of Florida and the University of Florida retain the right to modify or rescind any law or regulation governing the conditions of your employment.

Your employment will cease on the date indicated in this letter of appointment. No further notice of cessation of employment is required. **<If applicable >** Any reappointment beyond these dates is discretionary and will be dependent upon availability of funding, department needs, and your satisfactory performance of assigned duties.

**Outside Activities**

If you wish to engage in a reportable outside activity or interest, or if you think you have a conflict of interest, you must notify your supervisor using the proper University of Florida process and obtain approval prior to engaging in these relationships. This notification must be done annually for as long as you continue to engage in the outside relationship or have a conflict of interest. For more information about the disclosure process and policy, please visit the Conflicts of Interest Program website: [www.coi.ufl.edu](http://www.coi.ufl.edu).

**Benefits**

You may be eligible for state and/or UF Select benefits. If eligible, you will have 60 calendar days from your hire date to enroll as this action is not automatic. Information on available plans, eligibility, and enrollment can be found on the Benefits website <https://benefits.hr.ufl.edu/my-benefits/explore>.

For information on time away,including vacation, holidays, sick leave, and more, please visit the Benefits website at <https://benefits.hr.ufl.edu/time-away>.

**Retirement**

As a new employee, you must choose one of the retirement plans available to eligible State University System employees\*. An employee contribution of 3% is mandatory and enrollment deadlines may apply. Information regarding retirement plans can be found on the UFHR Benefits website <https://benefits.hr.ufl.edu/retirement>.

If you have questions about benefits, leave, and/or retirement. Please contact UFHR Benefits at (352) 392-2477 or benefits@ufl.edu.

*\*Please note that employees who have received a pension or distribution from a State of Florida retirement plan may not be eligible for all plans and should contact MyFRS Financial Guidance Line at (866) 446-9377.*

Attached you will find additional information regarding the details of your appointment. Should you have any questions regarding this appointment, please do not hesitate to contact NAME.

All of my colleagues join me in welcoming you as a member of our faculty. We believe you will find that the opportunities for professional development are limited only by your interest and ability.

Sincerely,

NAME NAME

TITLE and Chair DEAN

**Acceptance of Offer**

Please indicate your acceptance of our offer by signing below and returning a copy of the letter, with your original signature, to me no later than <date>. Your signature on this appointment shall not be deemed a waiver of the right to process a grievance with respect thereto in compliance with Article 28 (Grievance Procedure and Arbitration) of the UFF-BOT Collective Bargaining Agreement. The BOT-UFF Collective Bargaining Agreement is available at <https://hr.ufl.edu/manager-resources/employee-relations/union-contracts/united-faculty-of-florida-contract/>.

I understand and accept the conditions of this appointment as outlined above.

Accepted:

 NAME DATE