HAND DELIVERED or REGULAR MAIL

July 20, 2016

Name  
Address  
City, State Postal Code

RE: Renewal of Appointment

Dear Name:

On behalf of the Department and the Area/College, we are pleased to renew your temporary, non-tenure track, Faculty appointment with Washington State University. The terms of the renewal are as follows:

**Title:** Official Title (Position # \_\_\_\_\_\_)

**Location:** This position is housed on the Pullman campus of WSU [alter to specific location plus potential assignment other location/campus as required]

**Appointment:** The appointment is 12months/ 9months, temporary, non-tenure track, Faculty rank

**Overtime**

**Eligibility:**  Overtime Ineligible – You are to document leave activity by completing and certifying the Leave Report as described in the Business Policies and Procedures Manual 60.63. OR Overtime Eligible – You are to track hours worked and leave taken by completing and certifying the Time Report as described in the Business Policies and Procedures Manual 60.60.

**FTE:** 1.0 Full-time equivalency

**Salary:** $xx,xxx on an annual/academic year basis (or $\_,\_\_\_ monthly)

**Effective Dates:** The appointment is effective DATE thru DATE. In accordance with the WSU *Faculty Manual*, Section V. K. 1, this appointment will end on the date specified unless positive action is taken to renew your appointment. Accumulated annual leave must be used prior to the termination date, unless you obtain a written exception from your dean and department head.

The current *Faculty Manual*, and its revisions by the WSU Board of Regents, is the official guide to policies and procedures, and its provisions are conditions of employment. The *Faculty Manual* should be consulted and followed where applicable in resolving questions regarding your appointment. You may access the *Faculty Manual* at the following website: <http://facsen.wsu.edu/faculty_manual>.

The Washington State University Intellectual Property policy, which is included in the

*Faculty Manual* and is a condition of your employment, provides that certain intellectual

properties developed within the scope of the faculty members’ employment or

association, or developed with substantial use of university facilities, or developed under third party funding agreements are considered to be the property of the University. For any intellectual property which the University has an interest, the faculty member is hereby agreeing to execute promptly all assignments, waivers and other legal documents necessary to vest in the University or its assignee any and all rights to the intellectual property.

Please return a signed copy of this letter indicating if you accept or decline this offer of appointment to Name, Title, Mailing Address. A reply is requested at your earliest convenience, but no later than Date. Retain a copy of the letter for your records.

Thank you for your continued service to the College/Department.

Sincerely,

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

[Name] [Name]

[Vice Chancellor] Department Chair/ Head

[Name of Campus] Department of [name]

cc: Appropriate College/Department representative(s)

HRS Personnel File

HRS Employment Services Unit

Accept Decline

Name Date