Date

First Name Last Name

Street Address

City, State, and Zip Code

Dear First Name Last Name

Upon the recommendation of the faculty and chair of the Department Name at the University of South Florida (USF), we are pleased to offer you a non-tenure earning position as Position Title. Your Academic year or Annual salary will be $Salary at a FTE FTE. Your appointment will commence on Start Date. Your appointment is subject to the Constitution and laws of the State of Florida and the United States, the rules and regulations of all applicable governing bodies of the University

The University is issuing this contract in accordance with [USF Regulation USF10-102, Personnel [Faculty] Recruitment, Selection, Appointment](https://usf.app.box.com/s/zxanmrmxhz5u9arfiu7gflcrqfzow1ur) (<https://usf.app.box.com/s/zxanmrmxhz5u9arfiu7gflcrqfzow1ur>) and Article 8, Appointment, of the USF-UFF Collective Bargaining Agreement. This appointment will remain in force unless otherwise specified. Faculty may be assigned to teach at other USF campuses.

Note: If hired without a search and using a waiver of advertisement, add the following language: Your employment under this contract will cease on End Date. No further notice of cessation of employment is required.

INCLUDE THE FOLLOWING PARAGRAPH IF FUNDED BY “NONRECURRING FUNDS” (e.g., contracts and grants, sponsored research funds and grants and donation trust funds):

This appointment is funded from non-recurring funds and is subject to the continuation of those funds. Therefore, this appointment is temporary and will end as specified above. In the event the funds are discontinued or reduced, this appointment may end sooner or result in a reduction of your FTE.

This offer is contingent upon the successful completion of satisfactory reference checks and a criminal history background check, consistent with USF policies. Upon signing this letter, you will receive instructions on how to initiate your background check.  If you do not initiate the background check in a timely manner or if the results have not been received before the above listed start date, then your start date will be revised.  Please note, if the results of the background check and/or reference checks do not meet USF standards, this letter of offer may be revoked.  You may review the USF [Criminal History Background Check Policy #0-615](https://usf.app.box.com/v/usfpolicy0-615%22%20%5Co%20%22Criminal%20History%20Background%20Check%20Policy%20#0-615 - PDF) (<https://usf.app.box.com/v/usfpolicy0-615>) and [Employment References Policy #0-616](https://usf.app.box.com/v/usfpolicy0-616) (https://usf.app.box.com/v/usfpolicy0-616) for further information.

The USF/UFF Collective Bargaining Agreement (Article 6) prohibits discrimination against any employee based upon race, color, sex, sexual orientation, religion, national origin, age, military status, veteran status, disability, political affiliation, marital status, or employee rights related to union activity as granted under Chapter 447, Florida Statutes. Claims of such discrimination by USF may be presented as grievances pursuant to Article 20, Grievance Procedure and Arbitration.

(REMOVE THE FOLLOWING STATEMENT IF THE INDIVIDUAL IS **NOT** ESSENTIAL PERSONNEL) [ ]

This position has been designated as Essential Personnel. Essential Personnel may be required to participate in preparedness/response/recovery activities outside of normal work hours, including USF closings, in response to a major emergency or natural disasters affecting USF operations.

(REMOVE THE FOLLOWING STATEMENT, AS WELL AS THE MOVING AND RELOCATION PAYMENT DETAILS ATTACHMENT, IF THE INDIVIDUAL IS **NOT** RECEIVING RELOCATION ASSISTANCE.) [ ]

USF is providing you in its offer of employment a moving and relocation payment. The details and terms of that payment are contained in the Moving and Relocation Payment Details Attachment to this letter. Please review that document, which is incorporated into this offer letter.

It is your obligation to report outside activity and conflict of interest under the provisions of Article 19, Conflict of Interest and Outside Activity of the [USF-UFF Collective Bargaining Agreement](https://www.usf.edu/hr/documents/employment-resources/employee-labor-relations/uff-collective-bargaining-agreement.pdf) (<https://www.usf.edu/hr/documents/employment-resources/employee-labor-relations/uff-collective-bargaining-agreement.pdf>).

As a condition of employment, you will be required to meet USF’s faculty credentialing outlined in [USF Policy #10-115, Faculty Credentials for Teaching Undergraduate and Graduate Courses](https://usf.app.box.com/s/wx3aj082tw3hc6d6nhvbqp52yybxuj2f) (<https://usf.app.box.com/s/wx3aj082tw3hc6d6nhvbqp52yybxuj2f>). Please arrange for three official transcripts for all graduate coursework completed and certifying the highest level of degree to be sent to Name of Departmental Contact by Return Due Date. Final appointment is subject to verification of your credentials.

On January 1, 2014, key parts of the Affordable Care Act (ACA) went into effect, and federal law requires employers to provide notices to all active employees regarding health insurance marketplace coverage options. The coverage offered through the Marketplace may not impact the benefits you may be eligible for through USF.  However, the notice should be carefully read, as it provides some basic information about the Marketplace and employment-based health coverage offered by USF.  You may review the [Marketplace Notice](https://cloud.usf.edu/human-resources/resources/showfile/2/233) (<https://cloud.usf.edu/human-resources/resources/showfile/2/233>) for further information.

Coverage offered by USF *may* be effective as soon as the first day of the month following your hire date. Your hire date and the date in which you elect coverage will determine when your benefits begin. **Please refer to the** [Benefits Summary](https://www.usf.edu/hr/documents/benefits/benefits-summary.pdf) **for important details regarding enrollment, eligibility, plan options and more.** It is important to elect coverage promptly by logging into [People First](https://nam04.safelinks.protection.outlook.com/?url=https%3A%2F%2Fpeoplefirst.myflorida.com%2Fpeoplefirst%2Findex.html&data=05%7C02%7Cdesireed1%40usf.edu%7Ca72d252f25cf46d6c79808dd03787301%7C741bf7dee2e546df8d6782607df9deaa%7C0%7C0%7C638670538052479514%7CUnknown%7CTWFpbGZsb3d8eyJFbXB0eU1hcGkiOnRydWUsIlYiOiIwLjAuMDAwMCIsIlAiOiJXaW4zMiIsIkFOIjoiTWFpbCIsIldUIjoyfQ%3D%3D%7C0%7C%7C%7C&sdata=zDPoaNfCIvQaFgMudwxvWAwmc9sEaWuUS2qcH%2BoP9yI%3D&reserved=0) or calling their dedicated customer service line at (866) 663-4735**. Eligible employees have 60 calendar days from the date of hire to enroll in health insurance and prescription coverage. If you do not enroll during the specified timeframe, you will not have coverage.** Premiums are collected a month in advance. Eligible employees may enroll and/or make changes to their plan annually during [Open Enrollment](https://www.usf.edu/hr/benefits/open-enrollment.aspx). Enrollment and/or changes during Open Enrollment are effective January 1.

If you wish to accept this contract on the above terms, please sign where indicated. Your signature on this document shall not be deemed a waiver of the right to process a grievance with respect thereto in compliance with Article 20 Grievance Procedure and Arbitration.

We are enthusiastic at the prospect of your joining the faculty. Your background and qualifications will add unique strength to the Department and College, and hence to USF as a whole. Go Bulls!

Sincerely,

Name , Chair Date

College Name

Name , Dean Date

College Name

Name , Provost Date

**This offer will expire in ten days.**

**Please return a signed copy to** **Enter Name and Return Information (email address and/or fax number).**

Offer Acceptance Signature Date

First Name Last Name

Job Opening ID #: [Enter Job Opening #]

Position Number: Enter Position Number

Department Number: Enter Department Number

Job Code: Job Code

Supervisor Name: Enter Supervisor Name

Supervisor Title: Enter Supervisor Title

Supervisor Position Number: Enter Supervisor Position Number

Mail point: [Enter Bldg. and Room #]

Location: [Enter Bldg. and Room # of physical location of office]

Phone: [Enter Work Phone number]

Pay Distribution: [Enter GEMS account Code and %]

Background Check Level: Enter Level 1, Level 2, Level 2 Summer Program or Not Applicable

Moving Allowance

A comprehensive transition allowance in the amount of $ will be paid in lieu of relocation cost reimbursement and/or comprehensive payment of moving expenses. The allowance will be paid within thirty (30) days upon hire as a lump sum payment. It will be processed as additional taxable compensation through the Payroll system with all applicable income taxes and FICA amounts deducted.

See IRS Publication 521 [(IRS Forms & Publications)](https://www.irs.gov/forms-instructions) and USF [procedures](https://usf.app.box.com/s/idfoa85be3i36m9dmfq06v2qwitekld0) for additional information regarding qualified moving expenses.

**Clawback/Repayment**

Should you voluntarily terminate your employment with USF prior to the completion of two years of service after receiving a moving allowance greater than or equal to $3,500.00, you agree to reimburse USF for this payment according to the following rates and schedule:

|  |  |
| --- | --- |
| Separation from Employment | Amount of Repayment |
| < six months | 100% of the net moving allowance stipend |
| < twelve months | 75% of the net moving allowance stipend |
| < eighteen months | 50% of the net moving allowance stipend |
| < twenty four months | 25% of the net moving allowance stipend |

The above amounts are subject to additional reimbursement of certain federal withholdings in accordance with USF’s standard payroll practices for repayments covering multiple calendar years, as applicable. Reimbursement may be effected by deducting from final wages and/or eligible leave payouts following separation of employment, as appropriate.

Candidate Name Candidate Signature Date

Hiring Authority Name Hiring Authority Signature Date

**Faculty Professional labs, Libraries, Supplies and Equipment**

The transition allowance does not apply to special situations involving the establishment or relocation of professional labs, libraries, supplies and equipment of faculty and researchers. These are direct payments to vendors through normal [USF Purchasing](https://www.usf.edu/business-finance/purchasing/staff-procedures/purchasing/index.aspx) and [USF Accounts](https://www.usf.edu/business-finance/controller/payment-services/acctpay.aspx) [Payable](https://www.usf.edu/business-finance/controller/payment-services/acctpay.aspx) procedures. An authorized USF employee must approve the expenditure. The new faculty or staff member must provide a letter from their old institution releasing the material and/or equipment to USF, and the USF department must provide a letter accepting the materials and/or equipment to be moved. A list of equipment must be provided to UCO [Asset](https://www.usf.edu/business-finance/controller/accounting-reporting/untitled.aspx) [Management](https://www.usf.edu/business-finance/controller/accounting-reporting/untitled.aspx) for Property tagging.

**Important Post-Offer Steps**

**Who needs to complete RightStart (new hire paperwork)?**

New employees, as well as rehired employees who left employment with USF for more than one year, are required to complete Right Start (new hire paperwork) on or before the start date on your offer letter.

**What do I need to do to initiate the RightStart Paperwork?**

You will receive an email from Human Resources containing the new hire paperwork that will need to be completed on or before the start date on your offer letter. **Please contact your future supervisor or designated contact if you do not receive the new hire paperwork before your first day of work.**



|  |
| --- |
| **IMPORTANT****YOU SHOULD NOT BEGIN WORKING PRIOR TO COMPLETING YOUR NEW HIRE PAPERWORK.** |

**How can I prepare for my first day?**

Information about your first day, campus parking and transportation, USF ID Card and other valuable details about the Tampa, St. Petersburg, and Sarasota-Manatee campuses can be found on our onboarding website (<https://www.usf.edu/hr-training/onboarding/>)

**LISTS OF ACCEPTABLE DOCUMENTS**

All documents containing an expiration date must be unexpired.

\* Documents extended by the issuing authority are considered unexpired.

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

**Examples of many of these documents appear in the Handbook for Employers (M-274).**

|  |  |  |
| --- | --- | --- |
| **LIST A****Documents that Establish Both Identity and Employment Authorization** | **OR** | **LIST B LIST C****Documents that Establish Identity AND Documents that Establish Employment****Authorization** |
| **1.** U.S. Passport or U.S. Passport Card |  | 1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address
 | 1. A Social Security Account Number card, unless the card includes one of the following restrictions:
	1. NOT VALID FOR EMPLOYMENT
	2. VALID FOR WORK ONLY WITH INS AUTHORIZATION
	3. VALID FOR WORK ONLY WITH DHS AUTHORIZATION
 |
| **2.** Permanent Resident Card or Alien Registration Receipt Card (Form I-551) |
| **3.** Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa |
| **2.** ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address |
| **4.** Employment Authorization Document that contains a photograph (Form I-766) |
| **2.** Certification of report of birth issued by the Department of State (Forms DS-1350,FS-545, FS-240) |
| **3.** School ID card with a photograph |
| 1. For an individual temporarily authorized to work for a specific employer because of his or her status or parole:
	1. Foreign passport; and
	2. Form I-94 or Form I-94A that has the following:
		1. The same name as the passport; and
		2. An endorsement of the individual's status or parole as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.
 |
| **4.** Voter's registration card |
| **3.** Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal |
| **5.** U.S. Military card or draft record |
| **6.** Military dependent's ID card |
| **4.** Native American tribal document |
| **7.** U.S. Coast Guard Merchant Mariner Card |
| **5.** U.S. Citizen ID Card (Form I-197) |
| **8.** Native American tribal document |
| **6.** Identification Card for Use of Resident Citizen in the United States (Form I-179) |
| **9.** Driver's license issued by a Canadian government authority |
| **7.** Employment authorization document issued by the Department of Homeland SecurityFor examples, see [**Section 7**](https://www.uscis.gov/i-9-central/handbook-for-employers-m-274/60-evidence-of-status-for-certain-categories)and [**Section 13**](https://www.uscis.gov/i-9-central/form-i-9-resources/handbook-for-employers-m-274/120-acceptable-documents-for-verifying-employment-authorization-and-identity/123-list-c-documents-that-establish-employment-authorization)of the M-274 on [**uscis.gov/i-9-central**](https://www.uscis.gov/i-9-central).The Form I-766, Employment Authorization Document, is a List A, **Item Number 4.** document, not a List C document. |
| **For persons under age 18 who are unable to present a document listed above:** |
| **10.** School record or report card |
| **6.** Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI |
| **11.** Clinic, doctor, or hospital record |
| **12.** Day-care or nursery school record |
| **Acceptable Receipts**May be presented in lieu of a document listed above for a temporary period.For receipt validity dates, see the M-274. |
| * Receipt for a replacement of a lost, stolen, or damaged List A document.
* Form I-94 issued to a lawful permanent resident that contains an

I-551 stamp and a photograph of the individual.* Form I-94 with “RE” notation or refugee stamp issued to a refugee.
 | **OR** | Receipt for a replacement of a lost, stolen, or damaged List B document. | Receipt for a replacement of a lost, stolen, or damaged List C document. |

\*Refer to the Employment Authorization Extensions page on [**I-9 Central**](https://www.uscis.gov/i-9-central/form-i-9-acceptable-documents/employment-authorization-extensions)for more information.