**Offer Letter for Post-Doctoral Associate**

(please remove the above title and place this letter on your unit/department electronic letterhead)

**Date**

**Name**

**Address**

**City, State, Zip Code**

Via email: **Email Address**

Dear **Name:**

I am pleased to offer you an appointment with the title of Post-Doctoral Associate. You will be assigned to the Department of **Department Name** and your duties and schedule will be determined by your supervising professor, **Supervisor’s First and Last Name**, **Supervisor’s Title**. (INSERT or DELETE AS APPLICABLE)Please review enclosed description of job duties.

Your initial appointment will be effective from **Start Date** through **End Date**. This **X.XX FTE,** regular, exempt appointment provides a monthly salary of $**Monthly Salary** which if annualized would be $**Annual Salary**.  Your appointment is contingent upon the availability of research funding, as well as, provision of documentation verifying that you have satisfactorily completed all of your requirements for your Ph.D.  The salary is subject to all deductions required by federal and state law and, if permitted by law, such other deductions as you may authorize in writing. Should you be renewed for this position, a renewal appointment letter will be issued to you annually.

(INSERT ITEMS 1-3 BELOW AS APPLICABLE)

In addition to the funding listed above, you will be provided with:

1. Equipment funds of **$Amount**. **Necessary Details.**
2. Travel funds of $**Amount**. **Necessary Details**.
3. You will receive relocation assistance for up to a cap of $**Amount**. This amount includes travel expenses between the date of acceptance and the start date for the purpose of transition and for house-hunting. Effective January 1, 2018, all moving/relocation expenses are taxable income to the employee and applicable taxes will be deducted from the employee’s paycheck after all receipts for the move have been received. For further information, please contact the Academic Personnel Office at [academicpersonnel@uta.edu](mailto:academicpersonnel@uta.edu).

(INSERT PARAGRAPH BELOW AS APPLICABLE) - If the FTE for this appointment is .50 or greater

Upon submitting this signed offer letter you will be directed to complete your new employee and benefits paperwork. Your new employee paperwork must be completed prior to your hire date. You will be entitled to all employee benefits authorized by the Texas Legislature as provided under current state law. The UT Arlington Human Resources Department will discuss all employee benefits with you at the time you complete the paperwork for your appointment, including the level of premium sharing provided by the University. **Please be prepared to provide copies of your marriage certificate, your child(ren)’s birth certificates or appropriate adoption paperwork when enrolling your dependents for benefits.** All benefit elections must be made within 31 days of the date of employment.

(INSERT PARAGRAPH BELOW AS APPLICABLE) - If the FTE for this appointment is less than .50

Upon submitting this signed offer letter you will be directed to complete your new employee paperwork. Your new employee paperwork must completed prior to your hire date. The position you are being offered is non-benefits eligible.

The University now uses the federal electronic employment verification system known as E-Verify for all new hires and rehires. The E-Verify system compares the information that employees submit on their Form I-9 with records maintained by the federal government. The E-Verify program has stringent deadlines for processing verifications and penalties for non-compliance. ***This requires that you report to the Human Resources department on or before your first day of employment to complete this process.*** You can find a copy of the I-9 and a list of acceptable documents to verify employment eligibility by going to: <http://www.uscis.gov/files/form/i-9.pdf>. We are required by the Federal Immigration Reform and Control Act to have documentation that each new employee (both citizen and non-citizen) hired after November 6, 1986 is authorized to work in the United States. You must meet the requirements of the Act to qualify for appointment.

If you are a foreign national in need of US work authorization this offer is contingent upon your ability to satisfy all immigration requirements, US travel regulations, and University policies especially those regarding travel and entering the country. If external circumstances limit your ability to meet all these requirements the University of Texas at Arlington reserves the right to delay or withdraw this offer.

This offer is also contingent upon satisfactory completion of all pre-employment screening requirements, which includes a criminal background check, and receipt of your terminal degree to meet certification necessary for accreditation.

The faculty of the Department of **Department Name** are enthusiastic about your proposed appointment. I share that enthusiasm and look forward to having you join us. Please indicate your acceptance or declination of this offer by signing in the space indicated below and returning via email to **Name** at **Email Address** on or before **Date** so that we may forward your appointment for the review and approval process.

If you have any questions, please call me.

Sincerely,

**Name of Dean**   
Dean, **College or School**

xc: Jim Grover, Dean, Graduate School

Academic Personnel Office ([academicpersonnel@uta.edu](mailto:academicpersonnel@uta.edu))

**Name of Assistant/Associate Dean for Graduate Affairs**,

**Name of Department Chair**, Chair, **Department Name**

**Name of Supervising Professor**, **Title of Supervising Professor**, **Insert Name of Supervising Professor’s Department**

(INSERT ITEMS BELOW AS APPLICABLE)

**Assistant/Associate** Dean for Graduate Affairs, **School/College**

Satu Birch, Director, International Student and Scholar Services-**only if international**

Enclosures: Appendix A -Postdoctoral Fellow Agreement; Job Duties/responsibilities.

I accept this offer of appointment.

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**Candidate Name** Date

I decline this offer of appointment.

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**Candidate Name** Date