Select the date

Enter postdoc’s full name

Enter postdoc’s address line 1

Enter postdoc’s address line 2

Enter postdoc’s address city, state, zip

Dear Enter postdoc’s name:

We are pleased to appoint you to a Postdoctoral Fellowship at Temple University. Your participation in this fellowship program will strengthen the research capabilities of the select appropriate school/college in which you are assigned as well as Temple University as a whole. We believe the experiences you gain will substantially enhance your career options.

**TERMS AND CONDITIONS OF THE POSTDOCTORAL FELLOWSHIP**

**Department in Which Research Is Required**

Enter department in the select appropriate school/college

**Faculty Mentor in the Department**

Enter mentor’s name

**Period of the Award**

Select start date – select end date

Any change in start date must be approved in writing by your faculty mentor and the Graduate School.

**Annual Salary**

Enter total annual salary to be paid in monthly installments and adjusted yearly to reflect Temple University’s compensation guidelines.

**Type of Service Required**

By accepting this appointment, you agree to participate in a full-time regimen of advanced training and research; engage in scholarship or creative work that results in publishable findings; and conform to ethical standards in research and scholarship. Your employment is contingent on sufficient funding and continued performance acceptable to Temple University and your faculty mentor. Your employment is renewable annually upon written agreement, provided successful review of a yearly evaluation. However, this appointment may not extend beyond five years at Temple University.

**Benefits Awarded**

You will be entitled to the standard postdoctoral fellow benefits, which include:

* A choice of medical plans, including prescription coverage for you and eligible family members (i.e., spouse and children under age 19)
* Dental coverage for you and eligible family members
* Two weeks’ paid vacation accrued over the course of the first year
* Up to 10 sick days a year
* Voluntary tax-deferred annuity plans (100% employee funded)

In addition, you will be eligible for up to enter dollar amount for moving expenses upon presentation of original receipts. You will also be eligible for an annual professional travel allowance of enter dollar amount.

A complete explanation of Temple University’s benefit plans, as well as enrollment forms, will be made available to you when you attend our orientation program prior to your first day of employment.

**Employment Performance**

In the performance of your functions as an employee, you have an obligation to avoid ethical, legal, financial, and other conflicts of interest to ensure that your actions and outside activities do not conflict with your primary employment responsibilities at the institution. Employees are also expected to understand and be in compliance with applicable laws, as well as University and employment policies and regulations, including NCAA regulations when interacting with student athletes.

**Policies and Procedures of Temple University**

This Postdoctoral Fellowship is subject to all policies and procedures of Temple University and its schools/colleges. Applicable policies may be examined in the Office of the Secretary or on Temple University’s policy website (<http://policies.temple.edu>). By signing and initialing each page of this appointment letter, you agree to be bound by all policies and procedures including, but not limited to, Temple University’s Invention and Patent Policy and Guidelines for Research and Other Sponsored Activities. In addition, you hereby assign to Temple University any and all intellectual property rights in any inventions created by you during the period of your employment and emerging from any university research or development activity, or from use of any university facilities or equipment. University policies are revised periodically, and you are responsible for adhering to the then-current version as maintained by the Office of the Secretary.

**Proof of Citizenship or Authorization to Provide Service in the United States**

Federal law requires that all persons provide evidence of U.S. citizenship or, if you are a non-citizen, evidence of authorization to provide service in the United States. Temple University requires that Form I-9 be completed **in person** at Temple University **before** beginning service at the University. If you are a citizen, lawful permanent resident, or non-resident alien, you must complete the I-9. Enclosed is a list of original documents you must provide to complete the I-9 form and verify employment eligibility. You may also view the form and instructions by visiting the U.S. Department of Homeland Security’s website at [www.uscis.gov/files/form/i-9.pdf](http://www.uscis.gov/files/form/i-9.pdf).

Temple University is unable to pay any portion of a salary before you have completed the I-9 and other required forms. If you are on a non-immigrant visa and work prior to your official start date, such service may be considered “unauthorized employment” by the Immigration and Naturalization Service Act and a violation of status.

**INSTRUCTIONS FOR ACCEPTING THE POSTDOCTORAL FELLOWSHIP**

**Deadline to Accept the Postdoctoral Fellowship and Return Required Documents**

This appointment is contingent on your providing proof of completion of your doctoral degree with either an official transcript sent directly by the institution that conferred the doctoral degree; a copy of your diploma; or a letter from your institution stating that you have completed and successfully defended your dissertation. If you find this offer satisfactory, please indicate your acceptance by signing, dating, and returning this original letter and one of the enclosed copies; an additional copy is included for your personal files. This offer must be accepted within 20 days of the date of this letter, or the offer is null and void.

**Award Acceptance Deadline**

Select acceptance deadline date – which is 20 days from the date of this letter

If you anticipate any difficulty in returning your acceptance within the time required, please contact Nina Marie Campellone, Project Manager of the Postdoctoral Fellows Office, by telephone, email, or fax prior to select acceptance deadline date.

Best wishes for success in your position as Postdoctoral Fellow at Temple University.

Sincerely,

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Zebulon V. Kendrick, Ph.D. Enter mentor’s name

Vice Provost, Graduate School Select mentor’s school/college

**ACCEPTANCE**

**I accept the terms and conditions of appointment as contained in this offer, including, but not limited to, the requirement of assigning certain patent and other rights to Temple University.**

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Postdoctoral Fellow’s Signature Date

**RETURN ALL PAGES OF THIS DOCUMENT (the Original and one Copy) SIGNED AND INITIALED TO:**

Nina Marie Campellone

Project Manager, Postdoctoral Fellows Office

Temple University Graduate School

1803 North Broad Street, 501 Carnell Hall

Philadelphia, PA 19122-6095

campello@temple.edu

Voice: 215-204-6587

Fax: 215-204-8781

CC: Kathleen Nogami, Director of Human Resources Payroll Management

Enter mentor’s name, Faculty Mentor

Enter dean’s name, Dean of Select appropriate school/college

Enter business manager’s name, Business Manager of Select appropriate school/college

Enter chair’s name, Department Chair

Enter business manager’s name, Department Business Manager

Enclosures: Enter any enclosures