**FOR USE WITH SPECIFIC TERM APPOINTMENTS ONLY – PROFESSOR OF PRACTICE, ASSISTANT, ASSOCIATE OR FULL PRIOR TO FULL-TIME AY PROFESSOR OF PRACTICE, ASSISTANT, ASSOCIATE OR FULL APPOINTMENTS**

**UNDERLINED PARAGRAPHS MAY BE TAILORED FOR YOUR DEPARTMENT**

YELLOW HIGHLIGHTED SECTION INDICATE THAT SPECIFIC INFORMATION NEEDS TO BE PROVIDED BY THE DEPARTMENT

Dear Dr.:

It is my pleasure to offer you a position as a/an (Assistant, Associate, or Full) Professor of Practice in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department at the University of Nebraska-Lincoln. This type of appointment is a non-tenure track position, authorized by Bylaw 4.4.8 of the Bylaws of the Board of Regents of the University of Nebraska. The provisions of Bylaw 4.4.8 (including those with respect to termination and grant funded positions) are incorporated into this letter of appointment, and you are advised to review those provisions prior to acceptance. This appointment is subject to all provisions of the Bylaws of the Board of Regents of the University of Nebraska (http://nebraska.edu/board/bylaws-policies-and-rules.html), and any amendments that may from time-to-time be duly adopted.

The term of your non-tenure track appointment commences on <date>, 201X and ends on <date>, 201X. This position is non-renewable on the basis that you have a full-time faculty of practice position appointment beginning at the start of the next academic year and does not count towards years of service for eligibility to apply for a Faculty Development Fellowship.

Your salary for this appointment will be $\_\_\_\_\_\_\_, paid in \_\_\_\_\_\_ monthly payments. (The payments for May and August will be prorated based on the number of days worked prior to the start of your academic year, full-time faculty of practice appointment.) You will receive the first monthly payment on or about <date>, 201X. You will be eligible for benefits, as established by the Board of Regents.

Your appointment is 1.0 (or fraction) full-time equivalent. [Use the appropriate FTE for your position]. Your apportionment of duties shall be \_\_\_\_% research/creative activities, \_\_\_\_% teaching, and \_\_\_\_% service. [Majority of apportionment – preferably 80% or greater must be in instructional activities]. Your performance evaluation will be based primarily on your performance in instructional activities.

Information on normal fringe benefits available to faculty can be accessed at the following website: <http://www.nebraska.edu/faculty-and-staff/benefits.html>. If you have questions about benefits or your eligibility for benefits, please contact the Benefits Office, Room 32, Canfield Administration, (phone: 402-472-2600).

Any acceptance of the offer contained in this letter, is contingent upon your ability to legally engage in the described employment in the United States. If you need assistance in obtaining the appropriate visa classification, please contact me to learn about the University’s visa support services.

If you have any questions about this offer please call me at (chair’s phone number). We are looking forward to having you join the department. This letter is sent in duplicate. If the offer is acceptable to you, please sign and return one copy to me by (due date). This offer will no longer be effective after that date.

Sincerely,

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(name), Chair (name), Dean

(name of department) (name of college)

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Donde L. Plowman, Ph.D.

Executive Vice Chancellor and Chief Academic Officer

Accepted:

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

(name of faculty member) Date