**Part Time Field Supervisor Offer Letter Template Effective July 24, 2024**

***REMOVED: Subject to the University’s COVID-19 policy***

NOTE and DELETE

* The Signed Offer Letter Must accompany the Academic Personnel Action form
* All hiring documents should be completed within 15 days of date of offer letter, unless date of offer is within 3-days of start of employment, then all documents are due prior to first date of start of employment
* I9’s must be completed within 3-days of start of employment, or is a federal violation
* Hiring documents include:
1. Original signed offer letter
2. Official original transcripts
3. Curriculum Vitae submitted for employment
4. Copy of Advertisement
5. All new hire forms

Instructions:

* Fill in blanks.
* Choose applicable term where bolded and delete the other term. Reformat without bold and without red or highlighting.
* Use information in [ ] as needed. Delete what is not needed including the bracket.

Revised February 2024 bg

Questions? Contact Office of Academic Finance 419.530-8481

[Date]

[Address]

[Salutation]

I am pleased to offer you an appointment as a part-time supervisor at The University of Toledo in the College.

 This appointment is for Semester/Year, which begins begin date and ends end date. Your assignment is to supervise student teacher or method students. This offer of employment is for a non-tenure track appointment limited to the period stated above, and creates no implicit or explicit commitment to continued employment beyond that time.

Upon your acceptance of this offer we invite you to visit the following web site to complete the necessary New Hire and Payroll Forms: <https://www.utoledo.edu/offices/provost/academic-administration/faculty-forms.html>

This appointment is contingent upon the following conditions:

* Completion of a successful background check; completion of an I-9 form validating eligibility for employment in the United States within the first three days of employment or earlier, and other required pre-hire forms and information;
* Completed new hire employment forms must be completed and returned to your college 30 days prior to start of employment or earlier.
* Receipt of official transcript from your terminal degree-granting institution, submitted to the Office of the Dean at **Mail Stop \_\_\_\_\_\_, Attention Dean NAME.**
* If any one of these conditions is not met, the appointment will be withdrawn.

 The gross salary for this appointment is [dollar amount), and is subject to mandatory withholdings. Salary will be adjusted if number of assigned students change.

 Part-time instructors are required to purchase a University identification card in the Student Union, room 1550. If you wish to park on campus you will need to purchase a parking permit, at your expense, available under your employee tab on your UT portal under auxiliary services. Please coordinate with your department to help determine when you will see this tab appear if you are unable to currently access it. If you need to secure a temporary parking permit until you can see the tab your department will be able to assist you.

 All supervisors are required to supervise within their licensure and teaching experience areas.

 Your performance will be evaluated by NAME. If your performance is not satisfactory, you may be disciplined, up to and including termination. In the event that you do not supervise the entire semester, for any reason, you will be compensated solely for the time you actually supervised.

 You are expected to complete and upload your required documentation to our college assessment and accreditation tool, and to conduct yourself in accordance with all University, College, and Departmental policies and procedures, and all applicable law. Please note, upon acceptance of this appointment you will be a public employee subject to the Ohio Ethics Law as found in Chapter 102 of the Ohio Revised Code.

 This offer of employment is based on the understanding that this is your only assignment with the University during the period stated above. If this understanding is incorrect, you must notify me immediately; failure to do so may result in termination.

 If the terms set forth in this letter meet with your approval, please sign and date where indicated, and return to [Name], 2801 W Bancroft St, Toledo, OH 43606, within ten days.

 We look forward to working with you during [Spring/Fall semester], [year]. If you have questions or need further information, do not hesitate to contact NAME/office/phone.

Sincerely,

Dean or Associate Dean

I have read and understand the terms of the appointment offered, and I accept those terms.

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NAME Date