

Semester _____

APPOINTMENT LETTER

Date:

Name:

Address:

Dear _____:

I am pleased to recommend you for _____

in the _____, with the following conditions of employment:

Title: _____

Position No. _____

Period of Employment _____

Annual Salary _____

Full Year Appointment: 1st 2nd 3rd 4th 5th 6th 7th

Full Year Appointment (Lecturer/Lecturer Doc Sched, CLT): 1st 2nd 3rd 4th 5th

For HEO Series Only: 1st Full Yr. 1st Reappt 2nd Reappt 3rd Reappt 4th Reappt 5th Reappt

This recommendation is subject to financial ability and the approval of the CITY UNIVERSITY of NEW YORK. There is no presumption of employment beyond the period indicated. The other terms and conditions of employment are those in the By-laws of the City University of New York, the collective bargaining agreement existing in the University and the rules and policies promulgated under and consistent with such By-laws and agreements.

Please sign this letter to signify your acceptance and complete the attached form(s). Make a copy of this letter for your records before returning the signed letter and completed form(s). Thank you.

We look forward to having you with us.

Sincerely,

Chairperson/ Dept. Head

Dean

President/ Vice President/ Provost

Appointee Signature

Date

Last 4 of SSN.

Comments

Cc: Budget
Payroll
Benefits
Region
Department
Appointee
Time & Leave