Date:

Dear:

I am pleased to confirm your appointment in the Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the **2016** Summer Sessions. Your appointment is as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Session** | **Salary** | **Course(s)** | **Credit Hours** |
| Pre-SessionEmployment dates:**May 16 – June 3** |  |  |  |
| 8-week SessionEmployment Dates:**May 16 – July 8** |  |  |  |
| 1st 5-week SessionEmployment dates:**June 6 - July 8** |  |  |  |
| 2nd 5-week SessionEmployment dates:**July 11 – August 11** |  |  |  |

The actual amount to be paid to you is based on the final enrollment for your course(s) and is guided by the CEHS partial pay schedule. Specifically, if a course does not meet minimum student enrollment numbers, your pay may be prorated by the number of enrolled students. If the pay is prorated, our department will contact you to discuss options for the course. Additionally, the department retains the right to cancel the course at any time prior to it starting.  If cancelled, you will receive no financial compensation.

Summer Session payment dates are as follows:

Pre-Session 8-Week Session 1st Session 2nd Session

80% - May 31 30% - May 31 76% - June 30 63% - July 29

20% - June 30 55% - June 30 24% - July 29 37% - August 31

15% - July 29

If you have any questions regarding your appointment, please contact me.

Sincerely,

Department Chairperson