January 8, 2020

[Dr./Ms./Mr.] [First Name] [Last Name]

[Address]

[City], [State] [Zip Code]

Dear [Dr./Mr./Ms.] [Last Name]:

I am pleased to confirm your appointment in the Department of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the **2020** Summer Sessions. Your appointment is as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Session** | **Salary** | **Course(s)** | **Credit Hours** |
| Pre-SessionEmployment dates:**May 18 – June 5** |  |  |  |
| 8-week SessionEmployment Dates:**May 18 – July 10** |  |  |  |
| 1st 5-week SessionEmployment dates:**June 8 - July 10** |  |  |  |
| 2nd 5-week SessionEmployment dates:**July 13 – August 13** |  |  |  |

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

67% - May 31 25% - May 31 68% - June 30 60% - July 31

33% - June 30 55% - June 30 32% - July 31 40% - August 31

20% - July 31

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

Sincerely,

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

(name), Chair Dori Smidt, Assistant Dean of Business Operation

(name of department) College of Education & Human Sciences

Accepted:

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

(name of faculty member) Date