

## WAYNE STATE POSTDOCTORAL TRAINEES RENEWAL LETTER

Revised March 27, 2013

5057 Woodward, Room 11208, Detroit, MI 48202 | Phone: 313.577.2170 | postdoc@wayne.edu

[Date] [Insert the date after the dean has signed the letter.]

[CANDIDATE'S TITLE & FULL NAME]
[ADDRESS]
[ADDRESS]

Re: Renewal Letter and Agreement

Dear [TITLE & LAST NAME]:

On behalf of the [School/College] and the [Department of], we are pleased to offer you a renewal of appointment as a Postdoctoral Fellow, [X% time] [USE IF LESS THAN 1.0 FTE]. Your renewal of appointment will begin on START DATE and is expected to extend through END DATE. [POST-DOCS CAN NOT SERVE FOR MORE THAN A TOTAL OF 6 YEARS - INCLUDING ORIGINAL APPOINTMENT]

Your salary will remain unchanged except as it may be adjusted under official University salary adjustment policy. [IF CHANGING SALARY, include the following: Your salary will be \$\_\_\_\_\_\_ for the term of this renewal.] [USE FOR SUBSIDY/GRANT CONDITIONED OFFERS: At least a major portion of your salary is supported by grant/contract funds. This means that your appointment is specifically conditioned on subsidy and is subject to Sections 2.51.01.120 and 2.51.01.130 of the Wayne State University Code Annotated. Any renewal or extension of assignment is dependent upon your satisfactory performance and upon the continuation of the subsidy. Should the subsidy be terminated or reduced, there is no direct, indirect, or implied commitment by the Department, the [School/College], or Wayne State University to continue your appointment, including both salary and any fringe benefits, beyond the cessation of, or reduction in, the subsidy.]

You will be responsible to the Dean and by his/her delegation to the Chair of your Department [OR: Director of your Institute/Center]. In this case you will directly report to the [MENTOR/PI NAME]. Your duties, subject to periodic review, will continue as in your current assignment.

[USE FOR NON-CITIZENS] Since you are not a citizen of the United States or a lawful permanent resident, this assignment is contingent upon your holding and maintaining approved employment authorization by the US Bureau of Citizenship and Immigration Services.

## [USE REMAINING CLAUSES FOR ALL APPOINTMENTS]

You must remember that vacation days need to be used during the term of the appointment; otherwise, if the appointment is not renewed, any unused days will be forfeited.

This is a non-tenure track appointment, carries no presumption of renewal or continuing tenure, and is subject to the discretion of the President or his/her designee. This offer may be modified only in writing, signed by a University official as authorized by University policy, and may not be modified or altered by any oral statements or representations.

## [NAME]

Postdoctoral Fellow Renewal Page Two

In compliance with the Clery Act, the University publishes it Security and Fire Safety Report annually. This document is posted on the Wayne State University Police Department website, <a href="www.police.wayne.edu/">www.police.wayne.edu/</a>, on the Dean of Students Office website, <a href="www.doso.wayne.edu/">www.doso.wayne.edu/</a>, and on the Office of the General Counsel website, <a href="www.generalcounsel.wayne.edu/">www.generalcounsel.wayne.edu/</a>. It can be downloaded from any of these three sites. Please take a few moments to read it carefully. It provides an overview of Wayne State's public safety resources, policies and procedures. This report also provides information on how you can prevent crime and increase your safety and security on campus, so please take a few moments to carefully review it.

If, as we hope, you find this offer to be satisfactory as presented, please indicate your acceptance by signing and dating this agreement and returning the originally signed agreement to **[CONTACT NAME]**. We recommend that you keep a copy of the signed agreement for your records. If we do not receive your signed acceptance within **[XX]** days from the date of this letter, this offer shall be rescinded and become null and void.

Sincerely yours,		
[MENTOR/PI NAME & TITLE] [DEPARTMENT NAME]		
[CHAIR/DIRECTOR NAME & TITLE] [DEPARTMENT NAME]		[Dean's Name], Dean [SCHOOL OR COLLEGE NAME]
on-line access to the Wayne State Ur	niversity Personn	acknowledge that I have been provided with el Manual for all Non-Represented Employees, anual.pdf, and encouraged regularly to review
NAME	Date	
[FOR NON-CITIZENS] Cc. Office of International Services		