(PLEASE COPY, REVISE AND PRINT TO YOUR DEPARTMENT LETTERHEAD)

Model Letter of Offer and Notice of Appointment
Postdoctoral Scholar

**Note to Departments:** This letter of offer constitutes an initial notice of appointment for a postdoctoral scholar. Conditions for renewal of this appointment should not be stated in this letter of offer. All paragraphs listed below are required, as noted.

This letter provides notice for a new postdoctoral scholar. Should you have questions, or need an exception to this model letter, contact the Office of Postdoctoral Programs in the Graduate School and copy the Human Resources Consultant.

**Commit no more than one academic year appointment in this notice of appointment.** For renewal of appointment in subsequent years or terms, complete a model notice of renewal/reappointment available at [http://hr.oregonstate.edu/policies-procedures/administrators/contract-renewal-and-non-renewal-model-letters](http://hr.oregonstate.edu/policies-procedures/administrators/contract-renewal-and-non-renewal-model-letters).

This appointment must be for a 12-month (1 year) period; i.e. the end date should be one year from the start date (irrespective of the fiscal year). All postdoctoral scholar appointments are considered full-time (1.0 FTE) commitments. Please ensure that you clearly articulate the stipend on a monthly basis.

An individual cannot be hired as a postdoctoral scholar if the PhD degree was awarded more than 5 years ago.

If the appointment will not be renewed or extended beyond the first year, the faculty mentor must provide the postdoctoral scholar a minimum of 2 months advance notification in writing (email or letter).

The stipend MUST follow NIH NRSA guidelines: [http://gradschool.oregonstate.edu/postdocs/stipends-and-benefits](http://gradschool.oregonstate.edu/postdocs/stipends-and-benefits)

Please forward a copy of (or link to) the Postdoc Survival Guide to the scholar along with the appointment letter: [http://oregonstate.edu/dept/grad_school/docs/postdoc_survival_guide.pdf](http://oregonstate.edu/dept/grad_school/docs/postdoc_survival_guide.pdf)

**Note to Faculty Mentor:** If at any time during the appointment you are considering early termination of the appointment (prior to the end date stated in the appointment letter), contact the Office of Postdoctoral Programs to discuss the process.

Date

Inside Address

Dear __________________:

I am pleased to offer you a postdoctoral scholar appointment in the [Office/Department/College] of ___________. This letter, when accepted below, serves as a notice of appointment for the period beginning _____ and ending **_____ with a stipend of $_____ per month. Renewals are at the discretion of ____________. If this appointment will not be extended beyond the first year, you will be given a minimum of 2 months advance notification prior to the end date of your current appointment.

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Offer Prior to Degree Completion - If the department would like to make an offer prior to a candidate’s completion of his/her required degree(s), the following paragraph must be included. The candidate must complete his/her academic program and be granted the required degree(s) no later than the start date of the internship.

This offer is contingent upon completion of your *** degree by [enter internship begin date here] ________, the start date of your internship. Please provide proof of completion of your degree to [department head or other appropriate department/college administrator] before the start date in order to demonstrate that the contingency has been met.

OSU Policies and Standards – Use in EACH letter:

This appointment is subject to all OSU policies and standards, which are incorporated by this reference.

Work Authorization Requirement – Use in EACH letter:

This appointment is contingent on your demonstration of your authorization to serve as a postdoctoral scholar in the United States at OSU. Continuation of the appointment will require your continuing ability to demonstrate that you remain authorized to receive a stipend as a postdoctoral scholar in the United States at OSU.

Criminal History Check - Use when an appointment is contingent upon a satisfactory criminal history check (CHC):

This position is designated as a critical or security-sensitive position; therefore, you must successfully complete a criminal history check and be determined to be position qualified as per OSU Standard 576-055-0000 et seq. Because you hold a critical or security-sensitive position, you are required to self-report convictions [and because you are assigned youth program duties, your criminal history will be checked every 2 years]. Offers are contingent upon meeting all minimum qualifications including the criminal history check requirement. If this requirement is not met at the time of appointment, your start date will be adjusted to a date after the requirement is met.

Valid Driver’s License/ Satisfactory Driving History - Use when an appointment is contingent upon a valid driver’s license/satisfactory driving history:

This position requires driving a university vehicle or a personal vehicle on behalf of the university; therefore, the incumbent must successfully complete a motor vehicle history check, possess and maintain a current, valid driver’s license in their state of residence, be determined to be position qualified and self-report convictions as per OSU Standard 576-056-0000 et seq. Offers are contingent upon meeting all minimum qualifications including the motor vehicle check requirement. If this requirement is not met at the time of appointment, your start date will be adjusted to a date after the requirement is met.

Assigned duties – Use in EACH letter:

Your assignment will be defined in an Individual Development Plan which you and your mentor will co-create and submit to the Office of Postdoctoral Programs within three months of the start date of your appointment. For more information about the postdoctoral scholar appointment at OSU, see http://gradschool.oregonstate.edu/postdocs/individual-development-plan

Insurance– Use in EACH letter:

Upon accepting this appointment, you must enroll in the health insurance plan at the following website: http://studenthealth.oregonstate.edu/insurance/. If you have other health insurance coverage deemed comparable to the university’s, you may waive coverage under the university’s plan. Information on
waiving coverage is available at [http://studenthealth.oregonstate.edu/insurance/](http://studenthealth.oregonstate.edu/insurance/). If you waive coverage under the university plan you are not eligible to receive the University’s contribution towards health insurance premiums as a cash back option.

**Personal Demographic Paragraph** – Use if appointee has never been appointed by OSU.  
(NOTE: A new form MAY be required when rehiring or reappointing a former employee.  See the OSCAR Rehire/Reappoint tasks instructional text when rehiring or reappointing a former employee to determine whether or not a new form is required.) The paragraph can be excluded if a form is not required:

Please complete the enclosed personal demographic form and return it to __________. This will speed up your access to campus services.

**Technology Transfer Statement** – Use one of the following paragraphs, as appropriate:

**Use if a Personal Demographic form is required:**

Oregon State University has a technology transfer program. You are required to sign an agreement concerning the rights to technology developed during your appointment at OSU. If you would like additional information, including rights to a royalty share, contact the Office of Commercialization and Corporate Development, Kerr Administration Building A312, (541) 737-3888.

**Use if a Personal Demographic form is NOT required:**

The technology transfer agreement signed at the time of your original appointment with OSU will remain in effect.

**Acceptance Statements** – Use in EACH letter:

If you find this offer to be acceptable, please sign one copy of the letter and return it to me. The other copy is for your records.

We look forward to your acceptance of this offer.

Sincerely,

[Dean, Director, or Department Head/Chair]   [Faculty Mentor]

I accept this offer, as outlined in this letter.

Postdoctoral Scholar Name ___________________________ Date ______________

cc: Human Resources Unit (following Postdoctoral Scholar signature)  
[Dean, Director or Department Head/Chair]