DATE

NAME

ADDRESS

ADDRESS

ADDRESS

**RE: Offer Letter**

Dear NAME:

It is with great pleasure that we extend to you a formal offer to join the faculty of the DIVISION NAME in the UNC Eshelman School of Pharmacy. As you know, we aspire to be the number one ranked school of pharmacy in the country. Having you join the Division and the School is consistent with that goal.

**Appointment and Compensation**

The UNC Eshelman School of Pharmacy is prepared to offer you a fixed-term appointment as RANK. This appointment will be effective START DATE until END DATE contingent on approval of the Provost. This position is contingent upon the continuing availability of funds from sources other than continuing State budget funds or permanent trust funds. Your performance will be reviewed annually for a one/three/five-year reappointment under the criteria described for the Scholarship of Discovery (see [Policies and Procedures Governing Appointment, Reappointment, Promotion, and Tenure for Faculty](https://academicpersonnel.unc.edu/files/2020/02/Trustee-Policies-and-Regulations-Governing-Academic-Tenure.pdf); dated January 30, 2020). Acceptable performance as a RANK for the Scholarship of Discovery should be documented by the following indicators: significance, innovation, independence, and demonstrable area of focus.

Your starting annual salary will be $SALARY plus fringes and benefits including enrollment in the State of North Carolina employee’s health plan. For general benefit inquiries you can call the Benefits main line at 919-962-3071. See also the enclosed “UNC-Chapel Hill Summary of Benefits 2013” and the “New Employee Orientation and Benefits Enrollment Information.”

Each prospective faculty appointee must provide information about his or her criminal conviction record using the form prescribed. Failure to provide the information in a complete and timely manner or willful omission, concealment or falsification of criminal conviction information may result in withdrawal of the offer of appointment. Please complete Form AP-2b (Authorization for Background Check), and Form AP-2a (Faculty Appointee Certifications and Conditions of Employment).

**Reporting and Responsibilities**

In your position, you will report directly to SUPERVISOR NAME AND RANK. NAME will conduct your annual evaluation. To facilitate your annual evaluation, you will be asked to complete the School of Pharmacy’s on-line Faculty Activity Report (FAR) at the end of each calendar year.

Your position as RANK in DIVISION and the School will have the following responsibilities:

* LIST THE RESPONSIBILITIES

**Deadline**

We request that you sign and return this Letter of Offer, in duplicate, by DATE.

NAME, we are very excited by the prospect of having you join our Division and are confident that you will do very well here at UNC. Please do not hesitate to contact us if you have any questions.

Sincerely yours,

DIVISION CHAR

Enclosures:

UNC-Chapel Hill Summary of Benefits 2014

New Employee Orientation and Benefits Enrollment Information

Form AP-2a Faculty Appointee Certifications and Conditions of Employment

**Signature of Acceptance**

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

Signature Date