Template

**NONRENEWAL NOTICE FOR APPOINTMENT THROUGH END OF SEVENTH YEAR ON TENURE-TRACK**

(Bracketed areas: Follow directions or fill in appropriate information.)

**[Date]**

**[Name]**

**[Address]**

**[City]**, **[State] [Zip]**

Dear Dr. **[Name]**:

Our records indicate that your appointment terminates on **[contract end date]**. In accordance with University statutes, University policies and procedures, and the WSU/AAUP-AFT Agreement, it is my responsibility to inform you at this time that your appointment will not be renewed (although you may, of course, be granted continuing tenure, pursuant to which the terminal date of an appointment is eliminated). As you know, term appointments for faculty and academic staff on the tenure-track are normally limited to seven years of full-time service. See WSU/AAUP-AFT Agreement Article XX.A.3.

Sincerely,

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**[name]** **[name]**

Chair, Dept. of **[department]** Dean, College of **[college]**

cc: [**Associate Provost]**, Associate Provost for Faculty Affairs, Provost’s Office

 Personnel Records