VOLUNTARY FACULTY LETTER

DATE

TITLE NAME AND ADDRESS

Dear Dr. NAME

On behalf of the SCHOOL/COLLEGE and DEPARTMENT, we are pleased to offer you a voluntary faculty appointment at the rank of RANK effective on or about START DATE. This appointment is subject to the pleasure of the President or his/her designee and is also contingent on favorable biennial reviews. This appointment carries no presumption of continuing tenure. The terms of this offer may not be modified or altered by any oral statements or representations. This offer may be modified only in writing, signed by a University official as authorized by University Policy.

Your duties, subject to review, are as follows: DUTIES

This offer is contingent upon the completion of a satisfactory background check that is required by University policy for this position, including, but not limited to, a criminal background check. If the University determines that your background check results are unsatisfactory, this offer shall be revoked. This offer is also contingent upon the completion of the campus health and safety requirements or request for a waiver, before your start date. These requirements can be found at <https://wayne.edu/coronavirus/vaccine-mandate>. If the University determines that the aforementioned requirement has not been satisfactorily met, this offer shall be revoked.

In compliance with the Clery Act, the University publishes its Security and Fire Safety Report annually.  This document is posted on the Wayne State University Police Department website, [www.police.wayne.edu/](http://www.police.wayne.edu/), on the Dean of Students Office website,  [www.doso.wayne.edu/](http://www.doso.wayne.edu/), and on the Office of the General Counsel website, [www.generalcounsel.wayne.edu/](http://www.generalcounsel.wayne.edu/).  The report can be downloaded from any of these three sites, and 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. Please take a few moments to read it carefully.

If you find the terms of this offer satisfactory, please indicate your acceptance by signing, dating, and returning the original of this letter. A copy is enclosed for your file. An offer for which a signed acceptance is not returned within NUMBER days of the date tendered is rescinded and becomes null and void. We look forward to your favorable response which should be returned to CONTACT NAME

Sincerely yours,

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

DEAN CHAIR

SCHOOL/COLLEGE DEPARTMENT NAME

I accept the terms and conditions of this offer.

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

NAME