UNIVERSITY OF KENTUCKY
NOTICE OF APPOINTMENT

NAME: ____________________________

DEPARTMENT: ____________________________

COLLEGE: ____________________________

I am pleased to confirm your appointment to the academic staff as follows:

TITLE: ____________________________

PERIOD OF APPOINTMENT: FROM ____________________________

TO 30 June ______ or continuous tenure ______

INITIAL SALARY: ____________, SALARY BASE: 10 Mos. _____ 12 Mos. _____ Other _____

TENURE: (a) Service elsewhere (up to three years) which is to be counted toward the probationary period for tenure as provided in the regulations governing tenure is ________ years.

(b) According to the regulations governing tenure, your maximum probationary period will end 30 June _________. (In order to provide fair notice of termination of employment where necessary, review of an individual's record and performance for tenure purposes should occur during the year preceding the last year of his probationary period.)

(c) Other conditions governing tenure:

Conditions governing appointment or assignment:

__________________________

Appointee

__________________________

President or Authorized Representative

Distribution: Original to appointee; copy to appointee's Dean, copy to Executive Vice President