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| --- | --- |
| **To:** (*insert Part-time Faculty Name*) | **Date:**  |
| **From:** (*insert Dept Head/Supervisor Name*) |
| **Dept/School Name:** | **Dept/School No:** |

**CONDITIONS OF THIS AGREEMENT**

This agreement is based upon UGA Academic Affairs Policy 1.09-10 [Appointment Procedures Policy 03.01.011](https://policy.uga.edu/policies/#/programs/rJXEyRRcp?bc=true&bcCurrent=011%20-%20Appointment%20Procedures&bcGroup=Appointment%20%26%20Promotion&bcItemType=programs) on Part-Time Faculty and is subject to the following conditions:

1. Your faculty rank/title will be part-time *<<insert faculty rank/title – e.g. part-time instructor, part-time lecturer, part-time assistant research scientist, etc.>>*
2. Your payroll employment dates will be \_\_/\_\_/\_\_ to \_\_/\_\_/\_\_. *<<dates should not cross fiscal years>>*
3. *<<If assignment is for instructional term, insert instructional dates (e.g. ‘The Spring 2021 Semester instructional dates are January 11, 2021 – May 11, 2021>>*
4. Your assignment will be *<<indicate duties>>*.
5. You will be paid a total of $X,XXX during this period based on a *<<insert fiscal or academic>>* annual salary rate of $XX,XXX. *<<if on academic payroll, insert the following:>>* You will receive five equal payments across the semester. *<<If on fiscal payroll, insert the following:>>* You will be paid monthly.
6. POSITION FUNDING*<<add if position continuation is contingent on external funding>>***:**  X% of funding for this position is paid from XXX *<<list external funding source/sources>>*. Continuation of employment is expressly subject to continued support from these external funding sources.
7. The Affordable Care Act requires employers to track employee hours worked/paid. It is expected that you will work an average of \_\_\_\_ hours per week as outlined in the table below. Please let your department head or supervisor know immediately if your job requires additional hours worked that significantly change the average expected so that it can be approved in advance and recorded. If you do not notify your department head or supervisor of any changes to your schedule, we will expect that you are averaging the number of hours per week noted above.

<<*Add rows as needed>>*

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| **Teaching Duties** |
| **Course No.** | **Course****Name** | **Days** | **Class Time** | **Location** | **Class Credit Hrs /Semester** | **Standard Hrs Worked/Week1** |
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|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Teaching Subtotal:** |  |
| **Non-instructional Duties** |
| **Description** | **Expected Hrs Worked/Week** |
|  |  |  |
|  |  |  |
|  |  |  |
| **Non-instructional Subtotal:** |  |
| **Total Expected Hours:** |  |

1Based on the University of Georgia Contact Hour Conversion Chart, presented in [UGA Policy 03.01.011, Part-time Faculty](https://policy.uga.edu/policies/#/programs/rJXEyRRcp?q=part%20time&&limit=20&skip=0&bc=true&bcCurrent=011%20-%20Appointment%20Procedures&bcItemType=programs)

1. The department head/supervisor of the unit in which the part-time faculty member is working must ensure the average hours worked per week follows the expectations stated above, and if instructional duties are assigned, that the assigned hours per week follow the [University of Georgia (UGA) Contact Hour Conversion Chart.](https://policy.uga.edu/policies/#/programs/rJXEyRRcp?q=part%20time&&limit=20&skip=0&bc=true&bcCurrent=011%20-%20Appointment%20Procedures&bcItemType=programs)
2. If your assigned duties include instruction and the course enrollment falls below the minimum, the decision to proceed with the course will be determined by the institution. We cannot guarantee that you will teach particular courses, or that you will be scheduled to teach.
3. This Letter of Agreement is contingent upon completion of a background investigation demonstrating your eligibility for employment in accordance with USG Background Investigation policy. Employment at the University of Georgia is subject to verification of an applicant’s identity and eligibility for employment as required by the Immigration Reform and Control Act of 1986 as amended.  As required by federal law, you must complete Section 1 of the I-9 no later than your first business day of employment.
4. Nothing in this Letter of Agreement shall affect UGA’s right to terminate the employment of the part-time faculty member at any time, with or without cause.
5. Additional Terms of Offer: <<*list other terms as applicable to this faculty position/appointment>>*

**Are you currently employed at another UGA unit and/or USG Institution?**

 **\_\_\_ Yes \_\_\_\_*No***

**Do you anticipate being employed at another UGA unit and/or USG Institution?**

 **\_\_\_ Yes \_\_\_\_*No***

***REQUIRED IF EITHER REPLY IS “YES”:*** *Attach a list of unit(s)/institutions & anticipated number of contact hours taught and/or worked per week per unit/institution per appointment term. Submit a copy of this signed agreement with attached list to* [*University Human Resources via a ticket*](https://hr.uga.edu/About_UHR/Our_Team/) *with attn: UGA Dual Appointment Coordinator in the subject. In most cases, the dual appointment agreement must be fully-executed by the Presidents of both institutions prior to the employment effective date. Note that initiation of this agreement is an on-going obligation prior to any new term of joint employment among USG units.*

Responsibility to ensure compliance with Appointment Procedures Policy 03.01.011-9, including completion of part-time faculty letters of agreement and use of the conversion chart or tracking of hours worked, is delegated to the senior administrative officer of each unit (dean, vice president, associate provost, etc.). Appointment Procedures Policy 03.01.011-9 stipulates that part-time faculty:

1. Are not accruing time toward tenure.
2. Are required to sign a letter of agreement for each appointment period and are not issued contracts.
3. Are not the same as adjunct (courtesy) faculty appointments, which are unpaid.
4. May be USG benefits eligible, depending on the duration of their employment and percent time employment. If the part-time appointment is continuous for more than one consecutive semester (excluding summer) and 50% time or greater, benefits will be offered based on percent time in accordance with the [Employees Categories policy](https://www.usg.edu/hr/assets/hr/hrap_manual/HRAP_Employee_Categories_Classification%2C_Compensation%2C_and_Payroll.pdf) in the USG Human Resources Administrative Practices Manual.
5. Are required to account for hours worked/week over the academic year. If teaching is an assigned duty, then the faculty member’s instructional work time is based on contact hours/week. See the [UGA contact hour conversion chart](https://policy.uga.edu/policies/#/programs/rJXEyRRcp?q=part%20time&&limit=20&skip=0&bc=true&bcCurrent=011%20-%20Appointment%20Procedures&bcItemType=programs) to convert instructional contact hours to standard hours worked and percent time employed. If teaching is not the only assignment, then part-time faculty must track their non-instructional hours worked/week.
6. Who work or teach at more than one UGA unit and/or USG institution must notify each unit/institution of the appointments, disclose the number of contact hours being taught or hours worked at each unit/institution, and may have his/her employment limited by the unit/institutions. A [*USG Dual Appointment Agreement*](https://www.usg.edu/hr/assets/hr/hrap_manual/HRAP_Dual_Appointment.pdf) between institutions must also be initiated.

This Letter of Agreement is made expressly subject to the applicable State and Federal laws and to the statutes and regulations of this institution, the Policies of the USG Board of Regents, which are available for your inspection upon request, and approval of the institution’s President. Your understanding of the term and conditions of this appointment as set forth herein is indicated by signing this Letter of Agreement.

Please indicate your acceptance of the terms of this offer by signing the enclosed copy of this letter and returning a signed copy of the letter to me no later than *[insert acceptance date]*. In addition, if you have not already done so, please request that an official electronic transcript of your highest degree awarded be sent directly to the Office of Faculty Affairs at ofatranscripts@uga.edu by the Registrar of the degree granting institution by *[insert date]*. If an electronic version is not available, please have an official copy mailed directly from the Registrar to: Office of Faculty Affairs 225 New College Athens, GA 30602.

Signature of Department Head/Supervisor Date

Signature of Part Time Faculty Member Date