NAME

ADDRESS

CITY, STATE, ZIP

Dear NAME:

I am pleased to offer you the position of **(POSITION)**, in the **(DEPARTMENT)** at Wright State University effective (**DATE**) at an annual salary of **($00,000.00)** to be paid in equal monthly payments the last working day of each month. This rate supports an appointment at **(FTE)** % FTE. (OPTIONAL: Your salary for the month of **(MONTH)** will be prorated from **(PARTIAL MONTH DATE)**. **This offer is contingent on successful passage of university mandated background check and education verification. As an unclassified employee, your employment with Wright State University will be on an “at-will” basis, which means that either you or the University are free to end the employment relationship at any time, with or without advance notice or cause. This letter is not a contract or guarantee of employment for any definitive period of time. By accepting this offer, you acknowledge that you have reviewed and will comply with the policies which can be reviewed at** [**https://policy.wright.edu**](https://policy.wright.edu/)**.**

As a Wright State part-time employee, you will be eligible for retirement and pro-rated sick leave. Wright State University, in an effort to promote the health and well-being of its faculty, staff, students, and visitors, has chosen to maintain a tobacco-free environment. The use of all types of tobacco products is prohibited in all university buildings and on all university-owned, leased, or managed properties, including parking lots, garages, and all outside areas.

All WSU employees are exempt from Social Security contributions on earnings from the university; however, you will be required to contribute to one of the Ohio Public Employees Retirement System (OPERS) Plans. WSU employees hired on or after March 31, 1986 are required to pay a Medicare contribution, currently 1.45% of their earnings.

All employees, citizens and noncitizens, working in the United States must complete a U.S. Citizenship and Immigration Services Form I-9. You must present acceptable documentation that establishes identity and employment eligibility within 3 business days of your hire date.

We are confident that you will be a valuable addition to Wright State University and sincerely hope you will accept this offer. Please sign below indicating your acceptance and return the original to me by (DATE). Remember to keep a copy for your files.

Sincerely,

**APPROPRIATE DEPARTMENT HEAD**

**TITLE, DEPARTMENT**

I accept the offer contained herein as indicated by my signature below.

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

**EMPLOYEE NAME**  **DATE**