Academic Year Additional Pay Contract

Name: Primary Department:

Compensatory Department: Effective Start Date: Effective End Date:

Pay Period Amount: Goal/Total Amount:

Assignment:

Departmental Authorization:

Chair Signature:

Date:

Note: This contract is null and void if the salary amount indicated above is greater than that authorized by the College and University.

Acceptance

The annual salary and appointment stated herein are subject to sufficient funds being appropriated by the State of Illinois; awarded/maintained by a grant or contract; and/or generated by tuition, fees, or local fund sources. Appointments at Northern Illinois University are subject to the statutes of the State of Illinois and the latest revisions of the governing bylaws, Regulations, policies and practices of the Board of Trustees. Appointments are also subject to the latest revisions of all university policies and procedures; most of which, are stated in employee handbooks, procedure manuals, and the Constitution and Bylaws of the university. Under certain state laws, as well as university regulations, policies and procedures in the university may be withheld from compensation payments to employees. Acceptance of this appointment includes consent to such withholding when assessed in accord with appropriate legal standards.

Temporary appointments shall be for a specific period of one year or less. There shall be no presumption or expectation of renewal or extension of temporary appointments. Each temporary appointment is a separate, non-continuous appointment. The terms of this appointment are binding upon both parties and shall remain in full force and effect during my employment at Northern Illinois University, including subsequent appointments, if applicable.

I understand that my appointment status is subject to availability of funds and/or applicable standards of performance. In the event of insufficient funding received from a fund source associated with my position, or upon notification of a curtailment or reduction in funding by an external grantor or agency funding my position, the appointment may be subject to amendment, termination, or revocation upon written notice. I hereby acknowledge and accept the terms of this offering letter, and all related university policies and procedures associated by my temporary appointment. I further understand and agree that the offer of appointment above, and my acceptance of such offer, may be revised or rescinded, and reissued, by Human Resource Services (HRS) for Northern Illinois University (which maintains final approval for all appointments at NIU), in the event there is an error or mistake. My signature and the date below signify my acceptance of the terms of the above appointment contract.

Employee Signature:

Date:



NORTHERN ILLINOIS UNIVERSITY

Division of Human Resource Services