

Date

Title and Job Code

Postdoctoral Associate, Job code 000394

FTE

The percent of full-time effort (F.T.E.) assigned.

Department, Program, College or Unit where primary appointment is held.

Salary

The postdoc's annual salary should be described in the letter of offer as follows: "Your initial annual salary will be \$_____. Subsequent annual salary increases will be based on your performance and the University of Florida's salary increase guidelines."

Employment begin and Employment Statement

Your begin date will be _____. Pursuant to University Regulations, your employment is renewable at the discretion of the University. In accordance with University of Florida rule 6C1-7.003, this position is considered OPS and is, therefore, temporary in nature.

Duties & Responsibilities

This area should be used to describe the assigned duties and responsibilities of the employee. Effort percentages should be listed for each of the following categories: clinical, research, service and teaching.

Employment Conditions

As a University of Florida employee, you should be aware of certain conditions associated with your employment as listed below. The state of Florida and the University of Florida retain the right to modify or rescind any regulation governing the conditions of your employment.

Outside Activity and Conflicts of Interest

"As a condition of your employment, you are required to follow the University of Florida's guidelines, policies, and procedures regarding conflict of interest and outside activities, including financial interests. If you propose to engage in any outside activity or have a potential conflict of interest, you must notify (supervisor) in writing using the proper University of Florida forms and obtain written approval from (supervisor) and the College of Medicine prior to engaging in these activities. Such notification must be done annually by July 1st for each subsequent year for as long as you continue to engage in such activity or have such conflict of interest."

Health/Risk Assessment Statement

THE FOLLOWING STATEMENT SHOULD BE INCLUDED IN ALL LETTERS OF OFFER FOR THOSE EMPLOYEES WHOSE JOB DUTIES INCLUDE ANIMAL CONTACT, PATIENT CONTACT, OR EXPOSURE TO BLOOD BORNE PATHOGENS:

“As a new employee of the College of Medicine whose job duties will involve patient care or animal care for which medical monitoring will be required, it is advisable and necessary that you participate in a confidential pre-placement health screening program administered by the University of Florida’s Occupational Medicine Program. Participation in this program will minimize any occupational risks to you and will ensure that you can safely perform the essential functions of your new position. Also, because your position with the College of Medicine will involve animal contact, a risk assessment for animal contact will need to be conducted. Enclosed is a pre-placement screening medical review form, along with a “Risk Assessment for Animal Contact” form, both of which need to be completed. Upon your arrival at the university, an appointment will be made for you to visit with a representative of the University of Florida’s Occupational Medicine Program to review your medical history and to conduct the risk assessment for animal contact. You will need to bring these completed forms with you for your appointment with the representative of the Occupational Medicine Program. Please be aware that your medical history information will be kept confidential and will not be shared with the College of Medicine or with the Department of _____.

*Those sections of this paragraph that are not applicable to the new employee (i.e., no exposure to animal care) should be omitted.

For employees who will have exposure to Blood borne pathogens, include the following:

Please also be aware that all employees who have contact with human blood or OPIM will be required to be trained by the University of Florida on the specifics relating to your contact with human blood. This training and documentation will occur following your arrival.”

The forms for the preplacement are located on the **Occupational Medicine Website. The appropriate forms should be attached to the letter of offer.

Federal Healthcare Programs

“As a condition of your employment, you must remain eligible to participate in Federal healthcare programs or in Federal procurement or non-procurement programs. If you are at any time excluded, debarred or otherwise declared ineligible to participate in Federal healthcare programs (other than through the College of Medicine approved “private contracting” arrangement) or in Federal procurement or non-procurement programs, or are convicted of a criminal offense related to the provision of healthcare items or services, this offer may be revoked or your employment with the University of Florida may be terminated immediately.”

Intellectual Property

“As a condition of your employment, you are required to follow the University of Florida’s Intellectual Property Policy, which is available at: <http://rgp.ufl.edu/otl/pdf/ipp.pdf>.”

Direct Deposit Program

“All new employees of the University of Florida are required to participate in the direct deposit payroll program for the deposit of their biweekly paychecks. A direct deposit form will be provided to you during your payroll sign-up appointment.”

Leave Benefits

Full-time University of Florida Postdoc Associates earn 5 hours of personal leave on a biweekly basis. Leave is accrued on a pro-rated basis equivalent to time paid in a biweekly pay period. Your personal leave balances may be used for either vacation or sick leave. Leave that is to be used for vacation may be taken after approval by your supervisor. In addition, you will receive ten paid holidays each year, as well as four personal leave days to be used between December 25th and December 31st. The four personal leave days are credited on December 2nd of each year. If you are considered “essential” personnel and you are required to work during these four days, you may use the four personal leave days in any increment from December 2nd through June 30th of the current fiscal year.

HIPAA Privacy Statement

“All University of Florida Health Science Center employees are required to sign a statement agreeing to maintain the confidentiality of protected health information. All University of Florida Health Science Center employees also are required to complete specialized training regarding privacy and security. You also will be required to complete principal investigator training. Arrangements will be made to assist you with accessing these on-line training programs following your arrival at the university. This training must be completed within five days following your date of hire. All Health Science Center employees are required annually to re-sign the confidentiality statement, and to annually complete the on-line privacy and security training, as well as the principal investigator training for as long as you continue to be employed by the University of Florida.”

*References to principal investigator training should be omitted when not applicable.

Immigration

“This offer of employment and your continued employment with the University of Florida is contingent upon your eligibility to work under the provisions of all applicable immigration laws and regulations including the Immigration Reform and Control Act of 1986, as amended. On or before your first day of employment, you must complete section 1 of the Form I-9 of the U.S. Citizenship and Immigration Services, and provide the necessary documents to establish identity and employment eligibility. If acceptable documents are not provided to establish employment eligibility on or before your third day of employment, your employment will be suspended until the appropriate documents have been provided by you to the department. A

list of acceptable documents to establish identity and employment eligibility can be found online at <http://www.med.ufl.edu/personnel/hradmin/ListAcceptDoc.pdf>.”

If the new employee is being hired with an H-1 visa, a separate letter signed by the chair and including an acceptance for the employee must be attached to the letter of offer. This separate letter must state the following: " As you know, you will be employed pursuant to an H-1B visa being authorized. Although your University employment contract is renewable on an annual basis, and is subject to all the University's regulations, the University is requesting H-1B status sponsorship for a period of ___ years, mm/dd/yyyy to mm/dd/yyyy, because at present, we have a reasonable expectation that your employment period will continue on a year to year basis.

As a foreign national who meets the qualifications for an employer-sponsored immigration status, the University of Florida, as your employer, is provided authority by immigration laws to request employment authorization on your behalf. The University however, cannot guarantee that employment authorization or visas will be granted and assumes no responsibility if any request is denied, delayed or conditioned. All such determinations rest with USCIS and the DOS respectively, and are beyond the scope of the University's authority. All employees bear a continuing responsibility throughout their employment to maintain their eligibility to work in the U. S and at the University in the position to which they are assigned. The University cannot pay a wage to any person not lawfully authorized to work regardless of the cause. Failure to timely receive or maintain authorization to be employed in the U.S at the University in the relevant position shall automatically terminate your employment status at the University.”

Fringe Benefits

As a Post Doc Associate, you will be eligible to enroll in health insurance. Please contact the Grad Assistant and Post Doc Associate Benefits Office at (352) 392-0003 during the first 30 days of your employment as enrollment in health insurance is not automatic.

You may be eligible to participate in the FICA Alternative Plan and other deferred retirement plans. Information regarding the FICA Alternative Plan and deferred retirement plans may be reviewed on the Human Resources website at <http://www.hr.ufl.edu/retirement/voluntary/default.asp>.

Moving Expenses (if applicable)

“The College of Medicine will defray all reasonable relocation expenses associated with the moving of your household goods from _____ to Gainesville, Florida. The University of Florida has a process for such moves and a representative from the Department of _____ will be assigned to provide assistance to you with this process.”

Background Check Statement

“Please note that this offer of employment is contingent upon completion of a successful pre-employment screening which may include a review of criminal records, reference checks, and verification of education.”

Choice of Law

“During the term of your employment, both you and the University of Florida are subject to the constitution and laws of the state of Florida, and the rules, regulations and policies of the Florida Board of Governors and the University of Florida Board of Trustees.”

Signature Line

Letter must be signed by the employee. Include the following statement at the bottom of the letter “I understand and accept the conditions of this letter of offer” and include a line for employee to accept position.

Revised 07/15/11