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| primaryBox Visiting Professor Offer Form |

**Instructions:** Please consult with the Provost before making a final offer to any candidate. Once the position is accepted please use this form to confirm all details of the offer and forward to Academic Affairs.

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| Candidate Name: | | | Department: |
| Candidate’s Current Mailing Address: | | | Date PhD received: |
| Department Salary Range, Lowest:      Highest: | | | If ABD, date PhD expected: |
| **Terms of Offer** | | | |
| Rank:  Assistant Professor     Associate Professor | | | |
| Salary (must be within advertised range and divisible by 12): $ | | | |
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| **Additional Incentives** | | | |
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| **Special Conditions** | | | |
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|  |  |  | |
| Dean’s Signature |  | Date | |
| Provost’s Signature |  | Date | |

Letter Sent (FA Initial) \_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Affairs 12/2014