Sample template of Appointment Letter for Part-Time Faculty – with several options

Date

Name
Address
City, State, Zip

Dear

(this is the most important)
I am pleased to offer you an appointment for the [ qtr., academic year, date ] as Adjunct [title] in the [Department/School/Division]. The appointment is effective [date ] and extends through [date]. You will be compensated at the rate of [ ]. You will be assigned to teach [ describe course, sections, etc. ].

(include if an issue)
Every effort will be made to accommodate schedule preferences, however, individual teaching assignments will have to be made within the confines of the overall schedule. Consequently, we cannot guarantee either preferred times and days or the number of preparations.

(this can also be useful)
Your appointment is contingent upon student enrollment, program need, and student evaluation, and the University reserves the right to change or withdraw course offerings, instructors, or schedules as these factors are evaluated and assessed.

(this can be used if necessary)
If, as we approach the beginning of a quarter, enrollment in one or more of your classes is low, we may have to cancel it. Certainly, we want you to know that we, too, are disappointed when a class does not meet minimum enrollment; we do not like to inconvenience faculty or students. If a course is cancelled, we shall notify you as promptly as possible.

(if you are making an annual appointment, here is some good language)
As an annually appointed adjunct [title], you are eligible to participate in the health care insurance plan with the university sharing one-half of the cost of the HMO Plan. Please contact the Benefits Office regarding the enrollment process (556-0373). If you are not already a participant, you will be enrolled in the State Teachers Retirement System. You are also eligible for three credit hours of tuition remission each term.

Please confirm your acceptance of the appointment by signing below and returning this letter as soon as possible. If you are unable to accept, please advise as well. We
appreciate your continued interest in being a part of the academic mission of the [college]. If you have any questions regarding your appointment, you are welcome to contact me.

Sincerely,

Name, Dean

Cc: Department Head
    Business Manager

I accept the terms of this appointment __________________________ Date ____________

(for annuals)
I prefer may annual salary to be paid in: ___________ - 10 monthly payments
      ___________ 12 monthly payments

(some of you also include this language)
As a part-time faculty member at the University of Cincinnati, I understand that my appointment and workload must comply with the requirements for part-time employment. I hereby certify that I have read the GUIDELINES FOR APPOINTMENT OF PART-TIME FACULTY and my appointment at the University of Cincinnati will comply with those guidelines. It is my responsibility to inform any units in which I have a pending appointment of my part-time employment status in other units at the University. Failure to comply with the FTE limits can result in termination of appointment with the University of Cincinnati.

(signature) __________________________ Date ____________