Florida State University Employment Contract ADJUNCT

THIS CONTRACT BETWEEN FLORIDA STATE UNIVERSITY AND THE EMPLOYEE IS SUBJECT TO THE CONSTITUTION AND LAWS OF THE STATE OF FLORIDA AND THE UNITED STATES, THE REGULATIONS OF THE FLORIDA BOARD OF GOVERNORS, THE FLORIDA STATE UNIVERSITY BOARD OF TRUSTEES, AND THE UNIVERSITY. NEITHER THIS CONTRACT NOR ANY ACTION OR COMMITMENT TAKEN PURSUANT TO IT IS FINAL OR BINDING UPON THE PARTIES UNTIL, AND UNLESS, THE SIGNATURE OF THE UNIVERSITY PRESIDENT OR REPRESENTATIVE AS APPROVING AUTHORITY, AND THE SIGNATURE OF THE EMPLOYEE HAVE BEEN AFFIXED.

2: Empl ID:

1. Employee Name	1.	Employee	Name
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3. Department:

4. College/School/Division, ETC:

				CONTRACT	PERIOD:	
Begin Date	End Date	Periods	FTE	Act	Biweekly	Period Amount
		======		====		

5. Class/ADMIN Title:

Job code: Empl Class:

6. Special Conditions of Employment:

YOUR EMPLOYMENT HEREUNDER WILL CEASE ON THE DATE INDICATED. NO FURTHER NOTICE OF CESSATION OF EMPLOYMENT IS REQUIRED.

THE SIGNED CONTRACT MUST BE RETURNED TO THE PRESIDENT OR REPRESENTATIVE WITHIN 10 DAYS OF THE DATE OF OFFER, OR IT WILL BE ASSUMED THAT THE OFFER OF EMPLOYMENT HAS NOT BEEN ACCEPTED. THE ORIGINAL MUST BE RETURNED TO YOUR DEAN'S OR DIRECTOR'S OFFICE, WHO WILL FORWARD IT TO THE OFFICE OF HUMAN RESOURCES. THE EMPLOYEE SHOULD RETAIN ONE COPY.

President or Representative

Date of Offer

Employee

Date of Acceptance

NO PERSON SHALL, ON THE BASIS OF RACE, CREED, COLOR, SEX, RELIGION, NATIONAL ORIGIN, AGE, DISABILITY, GENETIC INFORMATION, VETERANS' STATUS, MARITAL STATUS, SEXUAL ORIENTATION, GENDER IDENTITY, GENDER EXPRESSION, OR ANY OTHER LEGALLY PROTECTED GROUP STATUS, BE DENIED THE BENEFIT OF, OR BE SUBJECTED TO DISCRIMINATION UNDER ANY PROGRAM OR ACTIVITY AT THE FLORIDA STATE UNIVERSITY. THE UNIVERSITY IS AN EQUAL OPPORTUNITY EMPLOYER.

Date Generated: