

SECTION 1: DEPARTMENT

Employee Name:		Employee ID:	
Employee Degree:		Course Delivery Method:	
<input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's degree <input type="checkbox"/> Doctorate/Terminal		<input type="checkbox"/> Online <input type="checkbox"/> On Campus <input type="checkbox"/> MAFB <input type="checkbox"/> IVN <input type="checkbox"/> IS	
Contract Type:		Contract Period: <i>month/day/year</i>	
<input type="checkbox"/> Adjunct <input type="checkbox"/> Overload <input type="checkbox"/> Non-instructional		_____/_____/_____ to _____/_____/_____	
Department Name, Course Assignment and Number: <i>(One per form)</i>		Semester:	Year:
		<input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer	20_____
Course Level:	Course Credit Hours:	Course Funding Category:	
<input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate		<input type="checkbox"/> Regular <input type="checkbox"/> CEL <input type="checkbox"/> Local <input type="checkbox"/> Grant	
Contract Information: (comments)		Criminal History Records Check:	
		<i>Required:</i> <i>Completed:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes ... Date _____ <input type="checkbox"/> No	
Fund #:	Department #:	Project #:	Position #:
Estimated Enrollment:	Estimated Salary:	Final Enrollment: <i>(Payroll Use Only)</i>	Final Salary: <i>(Payroll Use Only)</i>
Dept. Chair Signature: _____ Date _____/_____/_____			

SECTION 2: EMPLOYEE

I accept this offer and agree to the terms and conditions below:

- a. The professional responsibilities inherent to this position will require satisfactory performance of all duties assigned to me.
- b. I will be required to comply with all relevant rules, regulations, and policies of this institution and the State Board of Higher Education.
- c. My salary will be paid semi-monthly subject to such perquisites and deductions as stipulated by the Board of Higher Education.
- d. This contract is subject to availability of anticipated funding and/or enrollments and Minot State University may terminate this contract based on unavailability or loss of funding or lack of sufficient enrollments as determined by Minot State University, with written notice to employee on or before the first date of employment.
- e. This appointment is dependent upon satisfactory performance of all duties and is subject to State Board of Higher Education and institution policies.
- f. Salary is based on final course enrollment at the end of the 100% add/drop period, and is paid according to the official adjunct/overload pay scale.

SECTION 3: ADMINISTRATION

Employee Signature: _____	Date _____/_____/_____
CEL Signature: _____	Date _____/_____/_____
VPAA Signature: _____	Date _____/_____/_____
VPAF Signature: _____	Date _____/_____/_____