

# Letter of Intent

## Postdoctoral and Predoctoral Appointments

Please Read: The following information constitutes conditions and terms of an offer made to you for the position described below. Iowa State University also uses this information for the purpose of maintaining personnel files. No persons outside the university are routinely provided this information. We also include in this offer the intellectual property agreement for all ISU employees. The candidate accepting this offer may not revise or add any terms or conditions of the appointment without prior agreement. Revisions or additions will only be accepted if both parties initial and date each instance. If you accept the position, your signature is required.

This appointment is a temporary position under the supervision of a faculty mentor. Typically these appointments are for three years or less in duration. Appointments may not last more than five years in this category of employment.

### I. POSTDOCTORAL/PREDOCTORAL INFORMATION:

Last Name	First Name	Middle Name/Initial	ISU ID#
Department/Unit/Center:			

### II. APPOINTMENT INFORMATION:

\* Predoctoral Associate - Please verify: 1. Prelim is completed:      and      2. Registered for at least a graduate credit during appointment:

Postdoctoral Fellow (awarded directly to or on behalf of someone selected in a competition, usually national scope)

Postdoctoral Trainee (awarded to someone selected by the university)

Postdoctoral Research Associate (generally paid off a research grant or contract)

Key  
Responsibilities:

Fractional time (minimum is 1/2):

Fund/Account Numbers:

Appointments below 100% - Provide explanation of part-time position. Is there additional source of funding to reach a 100% appointment? If yes, provide some details.

Monthly Stipend: \$                      and Annual Stipend: \$                      Dates of appointment:                      to:  
(Can be multiple years)

PI/Supervisor (printed):                      Dept Chair/Unit Director (printed):

PI/Sup Signature/date:                       Dept Chair/U-Dir Signature/date:

### III. POSTDOCTORAL / PREDOCTORAL SIGNATURE:

Postdoctoral appointments are contingent upon: (a) the continuing availability of funds; (b) presentation of acceptable documentation showing identity and authorization to work in the United States; (c) continued satisfactory performance of duties.

I understand the broad array of benefits and their extent/restrictions as documented by ISU Human Resources at: [www.hrs.iastate.edu/hrs/benefits](http://www.hrs.iastate.edu/hrs/benefits)

Postdocs with full-time appointments exceeding three months accrue vacation on a monthly basis at the rate of two days for each full month of employment. Postdocs appointed less than full-time accrue pro-rated vacation based on their fractional appointment. Vacation days are not allowed to carry over from one appointment to another nor can they be paid out at the end of the appointment.

Appointee agrees to assign, and does hereby assign, intellectual property developed in the course of employment to Iowa State University when such intellectual property is owned by the University in accordance with University policies. Appointee further agrees to execute assignment documents necessary to secure intellectual property protection for University-owned intellectual property. University may direct that assignments be made to the Iowa State University Research Foundation. Appointee further understands that third parties may have intellectual property rights pursuant to a contract and grant, and agrees to assign, and does hereby assign, such intellectual property rights to Iowa State University so that it can comply with such commitments. Appointee agrees that University may assign its rights to such third parties and may direct appointee to sign appropriate documents in favor of third parties to comply with the terms of a grant or contract.

I accept the position described above. Please sign and date below.

Signature:                       Date:

After signing, please return this form by this date:                      to:                      Address:

DEPARTMENT/UNIT/CENTER: 1-4 CHECK-OFF / FILL-IN

Reference - Postdoc Hiring Forms and Procedures [Link](#)

For New P-docs: 1. Degree Verification: If ISU - Month/Year

Or Other Institution - [Supporting documents](#) accompany LOI

2. Please enter Country Code if Postdoc is not US Citizen ([link](#)):

3. Completed "[Postdoc/Predoc Information Form](#)" attached to LOI:

For All P-docs: 4. Send Original to Graduate College:  Copies to: Appointee  Department/Unit  Academic Dean Office

March 2016