APPOINTMENT MEMORANDUM

Southeast Missouri State University

Cape Girardeau, MO 63701

Date_____

Name_____ Southeast ID_____
(Last, First, Middle Initial)

Position Title_____

Department_____

Anticipated Appointment Period_____ to _____ Amount $ _____ per ____month ____hour

This appointment is subject to University Policy and Procedures, both as they now exist and as the University may, from time to time, change, amend, add or delete such policies and procedures. This position is temporary and does not participate in the University benefit program. Temporary employment is anticipated for the period shown above; however, by accepting this offer of temporary employment, the employee acknowledges that both employee and employer may terminate the employment at any time, with or without reason or for no reason. If termination of this employment occurs prior to the end of the Anticipated Appointment Period, the University is obligated only to pay for work completed through the termination date.

Staff appointment provisions are described in the University's Business Policy and Procedures Manual (classification 03). This document contains University policies and procedures and is available from your department supervisor.

Special Provisions _____

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_____

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_____

Accepted and Signed: _____

University Official: _____
Director, Human Resources

For Office Use Only

_____

ACCOUNT INFORMATION

_____

Index No. %Salary % Full Time

_____

_____

_____

_____

Wage Code: _____ Hourly _____ Full-time

_____ Salary _____ Part-time

On-Call: ___ Yes ___ No