**CLASSIFIED EMPLOYEE**

Name and Address: Date:

MEMORANDUM OF APPOINTMENT, 20\_\_ - 20\_\_ Fiscal Year

You have been appointed to the following position as a classified employee at The University of Texas \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

|  |  |  |  |
| --- | --- | --- | --- |
| **Title and Code** | **Percent Time** | **Budget Period** | **Salary** |
|  |  |  |  |

This appointment is subject to the provisions of the *Rules and Regulations* of the Board of Regents of The University of Texas System, Regental and U. T. System policies, the rules and regulations of the University, and applicable state and federal laws. The salary is the gross salary for the indicated budget period only and is subject to deductions required by state and federal law and, if permitted by law, other deductions that you authorize. You also will receive such employee benefits as may be authorized by applicable laws.

Please indicate acceptance of this appointment by signing and dating the attached copy of this Memorandum in the space indicated below and return it to the Office of the \_\_\_\_\_\_\_\_\_\_\_\_ by September \_\_\_\_\_, \_\_\_\_\_\_, in order that your name may be placed on the payroll for the next fiscal year.

A revised Memorandum will be sent if there is a change in your status during the indicated budget period.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, President

I accept this appointment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Updated: May 1, 2013

(Health Affairs Form 11)