



**University of Kentucky  
College of Nursing**

315 College of Nursing Building  
Lexington, KY 40536-0232  
P: 859-323-5108  
[www.uky.edu/nursing](http://www.uky.edu/nursing)

DATE:

ADDRESSEE:

Dear \_\_\_\_\_:

It is a great pleasure to offer you an adjunct faculty appointment in the College of Nursing. As is customary, this offer is contingent upon approval by the Provost. We do not anticipate any difficulty in securing full support. Your reporting administrator will be Dr. [REPORTING DEAN].

The conditions of our offer are as follows:

Your appointment will be at the academic rank of adjunct ----- Professor without salary compensation for an initial term beginning [START DATE] and ending [END DATE – NOT TO EXCEED 3 YEARS]. The position is subject to yearly review and renewal on the July 1<sup>st</sup>. Your responsibilities, are [THE SAME AS THOSE IN THE STATEMENT OF CONTRIBUTION]

If these terms are acceptable to you, please respond by signing this document in the space provided below.

Please do not hesitate to contact [REPORTING ASSOCIATE DEAN] should you have any questions.

Sincerely,

[DEAN]  
University of Kentucky College of Nursing  
315 CON Building, 751 Rose Street  
Lexington, KY 40536-0232

[REPORTING ASSOCIATE DEAN]

I accept this faculty appointment at the University of Kentucky, College of Nursing on the effective date stated.

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[APPOINTEE]

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Date