**CONDITIONAL OFFER LETTER TEMPLATE FOR A TEMPORARY POSITION**

***Date***

***Candidate Name***

***Candidate Address***

Dear [***Candidate Name***],

I am pleased to extend to you a formal offer of temporary employment as [***Position Title***] within the [***Department Name***] at Western University of Health Sciences (“WesternU”). We believe your background will be a positive asset to the [***Department Name***] and WesternU.

WesternU is an “at-will” employer and therefore your employment with WesternU is at-will. This meansyour employment, whether introductory or regular status, may be terminated at any time by you or WesternU for any or no reason, as long as the reason is not otherwise prohibited by Federal or State law. Any contrary representations which may have been made to you are superseded by this offer. This is the full and complete agreement between you and WesternU on this term. Although your job duties, title, compensation and benefits, as well as WesternU’s personnel policies and procedures, may change from time to time, the at-will nature of your employment may only be changed in an express written agreement signed by you and the President of the University. This letter or any other oral or written representations will not be considered a contract or offer of employment for any specificperiod of time**.**

Your temporary employment will begin on [***Date of Hire***]. Your responsibilities in this position are outlined in the job description you have reviewed upon application for the position. You will also be supplied a hard copy to sign during your temporary employee orientation. Modifications to this position may occur as situations warrant and at the discretion of the University. This is a temporary status, [***full or part time***] [***non-exemp***t] [***fte***] position. Your hourly rate for this position will be [***Candidate’s hourly Rate***], and you will be paid overtime as applicable, pursuant to state and federal law. There are 26 pay periods per year. The expected dates of employment are [***date]*** through [***date***]. All forms of compensation referred to in this letter are subject to applicable withholding and payroll taxes.

As the [***Position Title***], you will report directly to [***Supervisor Name***], [***Supervisor Title***].

As a temporary employee you are not eligible to participate in the Benefits Program for the staff of WesternU. You may become benefit eligible at time of a status change to a benefitted position or if you meet the eligibility requirements of the Affordable Care Act (ACA). Temporary employees who have completed 30 days of employment with WesternU will receive 24 hours of sick time during each fiscal year and may begin using available sick time on the 90th day of employment. Thereafter, the employee will receive 24 hours of sick time at the beginning of each fiscal year.

As a temporary employee, you may be eligible for participation in the University’s retirement plan. The University offers a 403(b) Plan for eligible employees (generally employees who are scheduled to work at least 20 hours per week and who are not students). As a condition of employment, you must contribute 1% of our compensation to the Plan on a pre-tax basis. The University will contribute 1.5% of your compensation. You may defer additional amounts to the Plan on a pre-tax, or Roth after-tax basis. Currently, the University intends to match the first 4% of your elective deferrals as follows:

Employee Elective Deferrals University Matching Contribution[[1]](#footnote-1)

1% 1.5%

2% 3.0%

3% 4.5%

4% 6.0%

Employees of WesternU may purchase a WesternU parking permit for use in specified parking lots.   
The parking fee is determined by the parking option that you elect.

By executing this letter, you hereby acknowledge and confirm that you have not entered into any agreement with your current or any former employer, and are not otherwise subject to any restrictions, that would limit or restrict in any manner your ability to (i) perform your duties as a temporary employee of WesternU, or (ii) compete with your current or any former employer.

Please note that this offer of employment is conditioned upon the successful completion of a background screening process, if applicable. WesternU reserves the right to rescind and/or terminate any offers of employment and/or employment agreements with you should 1) you fail to complete the requisite steps associated with this letter; 2) the results of your background screening are not successful and/or 3) failure to comply with WesternU’s Vaccination Policy by submitting your vaccination status or exemption to [stu-emphealth@westernu.edu](mailto:stu-emphealth@westernu.edu) no later than your first day of employment. The WesternU Vaccination Policy and associated exemption forms may be accessed via the following links: [COVID-19 Vaccination Program Policy](https://www.westernu.edu/media/health/pdfs/covid-19-vaccination-program-policy.pdf), [COVID-19 Vaccination Medical or Disability Exemption Form](https://www.westernu.edu/media/health/pdfs/covid-19-vac-medical-or-disability-exemption-request-fillable.pdf), [COVID-19 Vaccination Religious Exception Form](https://www.westernu.edu/media/health/pdfs/covid-19-vac-religious-exception-request-fillable.pdf), [COVID-19 Vaccination Pregnancy Deferral Form](https://www.westernu.edu/media/health/pdfs/covid-19-vac-pregnancy-deferral-request-fillable.pdf). Furthermore, pursuant to federal law, this offer of temporary employment is contingent on your furnishing satisfactory evidence of identity and legal authority to work in the United States. In compliance with these laws, you must complete a Federal I-9 form. The completed, signed form, along with the required documentation showing your identity and legal authority to work in the United States will be coordinated with you by our Office of Human Resources for inspection on the first day of employment. **Failure to provide this documentation may result in a rescinded/revoked offer of employment.**

***This offer is valid for seven days from the date of receipt of this letter, after which time this offer becomes null and void.*** If you wish to accept this employment offer and the terms and conditions stated herein, please return to me a signed copy of this letter within the seven-day effective period. Except as set forth above, your execution of this letter agreement shall confirm that you are not relying on any representations, either oral or written, in accepting this offer of temporary employment.

If you have any questions regarding this offer, please contact [\_\_\_\_\_\_\_\_\_\_\_\_] at [\_\_\_\_\_\_\_\_\_\_\_\_].

On behalf of the [Department Name] and all WesternU staff and faculty, we look forward with great anticipation to you joining our team!

With Best Regards,

*Hiring Authority*

*Title*

Endorsement:

I accept and understand the employment terms outlined above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. The University has the right to change the amount of its matching contribution at any time. [↑](#footnote-ref-1)