**Affiliate Postdoctoral Fellow
Guide Sheet for Hiring Department
Updated: 10/3/2022**

An Affiliate Postdoctoral Fellow at FAU is defined as a postdoctoral scholar who has been awarded a fellowship or traineeship for postdoctoral study by an external agency, and the agency pays 100% of the fellowship or traineeship directly to the postdoctoral scholar. The Affiliate Postdoctoral Scholar is not an employee of FAU, nor are they eligible for any benefits provided by the university. All departments should ensure that the Affiliate Postdoctoral Scholar understands that they are not employed by FAU but are authorized to be on campus working under the advisement of a designated FAU Faculty member who will be serving as their mentor.

All departments must obtain authorization by their Chairs, Deans and the Office of Postdoctoral Affairs, before offering an appointment.

College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faculty Mentor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will this affiliate be granted the following privileges?

Owl Card [ ]  Use of Library [ ]  FAU Email account [ ]  FAU Office [ ]

FAU Office Phone [ ]  FAU computer [ ]  Parking at Staff Rate [ ]

Lab Space in accord with policy and availability [ ]

Z# (**To be assigned by the Office of Postdoc Affairs**): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For the Appointment Letter**

Postdoc First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postdoc Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Personal Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Required Title: **Affiliate Postdoctoral Fellow** (cannot be changed)

Dates of Appointment: From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: ­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (start and end dates should be determined by the grant they are supported by.)

The faculty mentor must provide a short summary of duties and responsibilities AND also complete a formal Independent Development Plan (IDP) within 30 days of the Affiliate Postdoc’s arrival. (see <https://www.fau.edu/research-admin/postdoc-affairs/mentoring/> for IDP Form)

**Required documents to collect – Send to postdocaffairs@fau.edu:**

[ ] Curriculum Vitae [ ] Award Notice [ ] Affiliate Personal Data Sheet/Signed Misdemeanor Form

[ ] Postdoc Mentoring Plan (if applicable) [ ] Background check approval

**[DATE]**

**[NAME]
[ADDRESS]
[ADDRESS]**

Dear **[NAME]**,

On behalf of **[MENTOR NAME]**, I am pleased to offer you an appointment as an Affiliate Postdoctoral Fellow in the **[NAME OF DEPARTMENT/INSTITUTE]** effective from **[START DATE**] until **[END DATE]**.   We are pleased you have chosen Florida Atlantic University as a site to fulfill your additional postdoctoral training. This is a non-tenure, unpaid appointment and can be terminated at any time by either party upon written notice. Please note that your service under this appointment will cease on the date indicated and that no further notice of cessation of employment is required.

Your duties and responsibilities for this position will involve **[ADD SUMMARY OF DUTIES]** under the direction of **[MENTOR NAME]**, who will be responsible for your assignments and evaluation. This appointment includes [**ADD A LIST OF PRIVLEGES if applicable e.g., FAU email, office space, etc.**]

Soon after you arrive, Dr. **[MENTOR NAME]** will discuss your research and career goals following the established mentoring plan. In absence of a mentoring plan, you are strongly encouraged to develop an Individual Development Plan (IDP) For more information about IDPs, contact the Office of Postdoctoral Affairs. You are encouraged to participate in available opportunities that support your professional development. The University provides access to professional development and/or career counseling to postdoctoral scholars through the Office of Postdoctoral Affairs.

Please be aware that all University regulations and policies pertain to this appointment. These include, but are not limited to, the Intellectual Property Policy, Policy on Faculty Conflict of Commitment and Conflict of Interest, Policy on Integrity in Research and Procedures for Reviewing Alleged Misconduct and policy and procedures related to the ethical use of humans and animals in research.

We are in receipt of your Personal Data Sheet and other forms required for this appointment. If you agree to accept this appointment under the conditions stated above, please return this signed letter of acceptance at your earliest convenience, at which time we will expedite this affiliate appointment.

Sincerely,

**[DEAN/DIRECTOR]
[TITLE]**

CC: **[MENTOR NAME]**Office of Postdoctoral Affairs [**email: postdocaffairs@fau.edu**]

I have reviewed and accept the above-described terms of the Affiliate Postdoctoral Fellow appointment at Florida Atlantic University.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**[NAME] [DATE]**