[Insert 1 Date]

[Insert 2 Student’s Full Name & Address]

Dear [Insert 3 Name]:

I am pleased to offer you a Graduate Externship. If you accept this award, you must register for a course of study approved by your academic advisor and maintain your status as a matriculated graduate student. You are required to remain in good academic standing and continue to make satisfactory progress (as defined by your school/college) toward your degree. You must also perform the required work at a level considered satisfactory by the designated University officer.

Please read this document and initial each page in the lower right-hand corner to acknowledge that you have read and understand all of the terms and conditions of this award. Sign the final page and return this copy to the person designated on the final page. Be sure to keep a copy for your own records. Temple University neither promises nor guarantees renewal of this award beyond the term offered.

Temple University also makes available Student Financial Aid in the form of loans. For information on loans, please consult the Student Financial Works website (www.temple.edu/SFS).

**TERMS AND CONDITIONS OF THE GRADUATE EXTERNSHIP**

**Department(s)/Unit(s) in Which Work Is Required**

[Insert 4 unit(s) name]

[Insert 5 name of school/college]

**Supervisor(s) in Department/Unit**

[Insert 6 name]

# Period of the Award

[Insert 7 start date] – [Insert 8 end date]

# Total Stipend for Period of Award

[Insert 9 total stipend] to be paid in [insert 10] monthly installments beginning on [insert 11 date of first check] and ending on [insert 12 date of final check].

# Type and Amount of Work Required

By accepting this award, you agree to provide to the University an average of [Insert 13 number of] hours of work each week during the term of the Graduate Externship. Your work may be assigned at any location within the University as specified by the designated University officer. At this time, in accordance with the workload guidelines established by Temple, you may expect your work assignment to be as described in the attached Assignment Form, which you are required to sign and return. This award constitutes a [Insert 14 full or % fractional]% appointment, and benefits awarded will be provided at this proportional rate.

# Health Insurance Benefits

If you have a full-time appointment for an entire academic year, Temple will contribute the premium required to pay for a 12-month single-coverage Keystone Point of Service plan. If you hold less than a full-time appointment or an appointment for less than an entire academic year, Temple’s contribution will be prorated accordingly. Current insurance plan options and rates can be found on the Human Resources website at [www.temple.edu/hr/students](http://www.temple.edu/hr/students).

If the amount contributed by Temple is not sufficient to fully pay the premiums for the plan you select, you will be responsible for any difference in premium. You will receive a bill from Independence Blue Cross for the differential and will be responsible for submitting payment directly to Independence Blue Cross. Temple’s obligation to contribute is conditioned upon your maintaining your current award status. If you fail to maintain your current award status, Temple’s contribution will be reduced pro rata for that period of time.

You may enroll in a plan online through the Independence Blue Cross website at [www.ibx.com/temple\_students](http://www.ibx.com/temple_students) during the designated open enrollment period. After you accept the award and have completed all employment procedures, your subsidy will be credited.

**Employment Performance**

In the performance of your functions as an employee, you have an obligation to avoid ethical, legal, financial, and other conflicts of interest to ensure that your actions and outside activities do not conflict with your primary employment responsibilities at the institution. Employees are also expected to understand and be in compliance with applicable laws, as well as University and employment policies and regulations, including NCAA regulations when interacting with student athletes.

# Additional Employment

Any other employment (within or outside of Temple) is subject to University approval and will be permissible only if it does not interfere with assigned duties or responsibilities and is in accordance with other Temple policies. Any Graduate Extern seeking other employment must notify the University by completing and submitting the “Request for Other Employment” form.

**Prorated Graduate Externship Clause**

If the Graduate Externship is discontinued for any reason, your stipend and benefits will be prorated through the last day worked.

### Conditions Subject to Change

The designated University officer may assert her/his sole discretion and place you in a different assignment if s/he deems it necessary to do so. The terms and conditions of this Graduate Externship are subject to change in accordance with changes in the level of external grant and/or contract funding or with changes in the needs of the department, school/college, or University which may necessitate an alternative to the projected predominant assignment.

**Policies and Procedures of Temple University**

This Graduate Externship is subject to all policies and procedures of Temple University, the Graduate School, and your school/college. You may review all academic policies in the dean’s office of your school/college and all University-wide policies and procedures in the Department of Human Resources or in the Office of the University Secretary. By signing and initialing this acceptance letter, you agree to be bound by all policies and procedures including, but not limited to, Temple University’s Invention and Patent Policy and Sexual Harassment Policy. University policies are revised periodically, and you are responsible for adhering to the then current version.

# Proof of Citizenship or Authorization to Study and Work in the United States

Federal law requires that all persons provide evidence of U.S. citizenship or, if you are a non-citizen, evidence of authorization to work in the United States. Temple University requires that Form I-9 be completed **in person** at Temple University **before** beginning employment with the University. If you are a citizen, lawful permanent resident, or a non-resident alien, you must complete the I-9. To view the form and instructions on what documents you will need to bring to complete the I-9 form, visit the Department of Justice website at http://www.ins.usdoj.gov/graphics/formsfee/forms/files/i-9.pdf.

Temple University is unable to pay any portion of a stipend before you have completed the I-9 and other required forms. If you are on a non-immigrant visa and work prior to your official start date, such work may be considered “unauthorized employment” by the Immigration and Naturalization Work Act and a violation of status.

**Modifications to Terms and Conditions of the Graduate Externship**

The terms and conditions described in this document may not be modified or altered by any oral statements or representations of any person.

**INSTRUCTIONS FOR ACCEPTING THE GRADUATE EXTERNSHIP**

**Deadline to Accept the Graduate Externship and Return Signed Documents**

This award is contingent upon your returning this initialed and signed acceptance letter and completing all other forms required by the University. Please initial each page of this letter, sign the last page, and keep a copy for your permanent files. This Graduate Externship must be accepted within 20 working days of the date offered, or the offer is null and void.

**Award Acceptance Deadline**

[Insert 15 Date]

If you anticipate any difficulty in returning your acceptance within the time required, please contact me by telephone, email, or fax.

Best wishes for success in completing your graduate degree at Temple University.

Sincerely,

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

[Insert 16 Name, Title of Person Authorized to Offer Graduate Externship]

[Insert 17 Email]

[Insert 18 Telephone]

[Insert 19 Fax]

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

Zebulon V. Kendrick

Associate Dean, Graduate School

**ACCEPTANCE**

**I certify that I am a** (circle one only)**:**  **U.S. Citizen Resident Alien Foreign National**

**I accept the terms and conditions of this award:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Student’s Signature Date

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

Student’s Printed Name Email

**RETURN ALL PAGES OF THIS DOCUMENT SIGNED AND INITIALED TO:**

[Insert 20 Name/title of person responsible for managing awards to which acceptance will be sent]

[Insert 21 Mailing Address]

[Insert 22 Email]

[Insert 23 Telephone]

[Insert 24 Fax]

CC: [Insert 25 courtesy copies of letter]

Enclosures: [Insert 26]