**TEMPLATE LETTER STARTS ON PAGE 2**
**INFORMATION:**

[Office of Postdoctoral Studies](file:///C%3A%5CUsers%5Ccgrim%5CDownloads%5COffice%20of%20Postdoctoral%20Studies) <https://postdoc.wisc.edu/>

**Post Degree Training Appointments – Postdoctoral Fellow**

* A research associateship is normally for a two- or three-year term, up to a maximum of five years, and is normally given to an individual who is within five years of having received the doctorate.
* Per the Unclassified Title Guidelines, the term for postdoctoral post degree training titles is for a **maximum of five years**: <https://www.ohr.wisc.edu/polproced/utg/EITtitles.html>
* Please note that time at another university as a postdoc will likely count toward the five-year limit at UW-Madison.
* For more details see the Research Associate Appointments and Postdoctoral Fellow/Trainee FAQ document <http://www.ohr.wisc.edu/polproced/uppp/0102_D.pdf>
* Extensions over three years, up to a maximum of five years, requires annual approval by the Dean's office HR prior to each year extension and must include a statement by the department indicating why training is continuing.

**PVL waiver**Training completion for post degree training titles - This waiver reason only applies to Research Associate and Postdoctoral Fellow/Trainee within the [post degree training titles](http://www.ohr.wisc.edu/polproced/UTG/EITtitles.html). The training completion reason is appropriate only for individuals who have completed their training and are switching to an academic staff title (e.g., Researcher or Scientist) in the same unit. It is not appropriate for an individual to compete for their own position, and therefore they should be hired using this waiver instead of through open recruitment. The post degree training must have been in the same position, in the same unit (UDDS), for at least 1.5 years for the training completion waiver reason to be appropriate.

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**COLLEGE OF LETTERS AND SCIENCE**

**EMAIL DRAFT TO YOUR HR BUSINESS PARTNER FOR APPROVAL BEFORE ISSUING LETTER**

**POSTDOCTORAL FELLOW EXTENSION LETTER**

[date]

[name and address]

Dear [name]:

(*Add the following paragraph for* ***exempt*** *positions, remove if non-exempt)*

The [name of Department/Center] at the University of Wisconsin-Madison is pleased to extend your current appointment as Postdoctoral Fellow from [start date] through [end date]. Your appointment will continue at [percentage]% time with a full-time annual (twelve-month) stipend rate of $[stipend rate].

(*Add the following paragraph for* ***non-exempt*** *positions, remove if exempt)*

The [name of Department/Center] at the University of Wisconsin-Madison is pleased to extend your current appointment as Postdoctoral Fellow from [start date] through [end date]. Your appointment will continue at [percentage]% time with an hourly rate of $[hourly rate] per hour based on the full-time annual (twelve-month) stipend rate of $[stipend rate].

*(Add the following paragraph if stipend is above the annual stipend rate* *\*see* [*Adjustments Calculator*](https://hr.wisc.edu/docs/pay/fellow-trainee-adjustment-calculator.xlsx)*\*)*

UW-Madison is on a biweekly pay schedule. Because your appointment start and end dates do not align exactly with the biweekly pay schedule, your biweekly stipend payments will result in an overpayment that needs to be adjusted. This is necessary to pay the stipend amount required by the sponsor [sponsor name], which is $[stipend rate]. You will see a negative adjustment of - $[SGA adjustment] on each biweekly earnings statement, which will ensure that your total stipend at the end of your appointment will equal $[stipend rate]. The total stipend amount is subject to change in the event of an early termination.

*(Add the following paragraph if stipend is matches the annual stipend rate\*see* [*Adjustments Calculator*](https://hr.wisc.edu/docs/pay/fellow-trainee-adjustment-calculator.xlsx)*\*)*

UW-Madison is on a biweekly pay schedule. The total stipend that you will receive, as required by the sponsor and over the course of your appointment, is $[stipend rate]. The total stipend amount is subject to change in the event of an early termination.

*(Add the following paragraph if stipend is below the annual stipend rate \*see* [*Adjustments Calculator*](https://hr.wisc.edu/docs/pay/fellow-trainee-adjustment-calculator.xlsx)*\*)*

UW-Madison is on a biweekly pay schedule. The total stipend that you will receive, as required by the sponsor and over the course of your appointment, is $[stipend rate]. Because your appointment start and end dates do not align exactly with the biweekly pay schedule, you will receive a lump sum payment of $[total SGA adjustment] at the end of your appointment period. This is necessary to pay the stipend amount required by the sponsor, which is $[stipend rate]. The total stipend amount is subject to change in the event of an early termination.

If you intend to terminate your appointment before the end date, there could be negative impacts to your stipend and health insurance. To avoid this, please contact [name of department administrator] as soon as your end date has been determined. Advance notice must be provided at least two weeks in advance of the early termination date.

**Please sign below to indicate your understanding of stipend payments:**

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 **Signature Date**

You will continue to collaborate with [name of professor] training on [specialization/project description].

I look forward to our continued working relationship.

Sincerely,

[name of person signing letter]

[title of person signing letter]

xc: [name of any individuals to be copied]