[Date]

[Name]

[Address]

[City, State, Zip]

Dear [Instructor Name]:

We are delighted you are scheduled to teach in the [department or program] at Montana State University Billings during [semester]. We are committed to you having a successful teaching experience. To ensure your success we have planned a comprehensive series of workshops during the academic year. You will receive further information regarding these opportunities at a later date.

Please be advised that part-time employment is dependent upon university funding and course enrollment. Your approved rate for part-time compensation is as indicated in the attached agreement. We will inform you if there is a change in the status of your position.

The following notices pertain to this appointment:

1. Individuals teaching on a part-time basis are limited to a total of 11 credits for classes taught for the university main campus and 17 credits for City College per academic year, including online semester credits. Individuals teaching on both campuses are limited to 17 credits including online semester credits with no more than 11 credits associated with the university campus.
2. Part-time employees are limited to working less than 20 hours per week unless prior approval is received from the Human Resources Office. If a part-time employee is working on campus in addition to teaching, teaching workload is calculated as 1.5 hours/credit per week. For example, a 3 semester credit hour class is calculated at 4.5 hours per week.
3. As an employee of Montana State University Billings, you are subject to all institutional policies and procedures governing the conduct of employees.
4. This appointment is not eligible for tenure and time in this appointment does not count as probationary service toward tenure.
5. This appointment is contingent upon the continued availability of sufficient funding from the current funding source for this position and/or the employing program, project, or unit. If funding is not available or sufficient to support the position, this appointment may be terminated within the appointment term at the option of the University.
6. This appointment may be terminated for cause at any time.
7. The appointment expires automatically at the end of the term specified above. No further notice relative to non-renewal will be given.
8. Reappointment is solely at the discretion of the University.

Enclosed please find the Part-Time Instructor Agreement Form. Read the agreement, complete the “Application Information Concerning Part-Time Employment” section, and if you concur, sign and return it to my office by [date]. In addition to these forms, the department is required to maintain a current professional vita on all part-time faculty as well as official university transcripts. If we do not already have your vita and transcripts, please provide them to the department.

We look forward to having you as part of our team. If you have additional questions, please feel free to contact us.

Sincerely,

[Chair]

[department or program]