**Non-employee Student Leader Notification Letter Template**

NAME

STREET ADDRESS

CITY, STATE ZIP

Dear [Student Leader Name],

Please consider this letter as documentation that you have been accepted into a Temp Student Leader - [working title] position at the University of Vermont. You will complete this role under the direct supervision of [supervisor name]. This position is expected to begin on [start date] and end on [end date]. The [working title] role is directly related to your primary [undergraduate/graduate] student affiliation at the University, therefor in order to complete this role you are required to maintain your student status.

This role is established to provide an educational leadership experience, and you will receive compensation of $[stipend amount] minus applicable taxes and withholdings, to be paid twice monthly.

While performing the student leadership role you acknowledge:

* You are not an employee of the University as a result of performing the student leadership role, and you are not entitled to employment with the University at the conclusion of the student leadership role.
* To perform all work allocated to you to the best of your ability;
* Comply with all lawful and reasonable directions and instructions given to you by employees of the University during the course of your student leadership role;
* Comply with any and all University policies and procedures that apply, or may apply, to you during the course of the student leadership role; and
* Undergo any and all training that the University deems necessary to enable you to safely and efficiently perform your duties during the student leadership role.

At all times, including after this student leadership role, you agree and acknowledge that:

* You will keep confidential any and all confidential information of the University that comes into your position.

Additionally, you accept that the role may be terminated prior to the end date at the sole discretion of the University. This document does not serve as an employment contract, but rather specifies the goals, intent and details of the student leadership role. This agreement constitutes the entire agreement of the parties with respect to the internship.

 Include if the driving is an essential responsibility of the student leadership role: Since driving a University vehicle is an essential function of the student leadership role, the University must obtain a copy of your current motor vehicle record; the results of which must be satisfactory to the University. Continuation of employment is contingent upon you maintaining a valid motor vehicle license. Additionally, you much obtain permission to drive a UVM vehicle by following the process found at the University Risk Management and Safety Website specific to the [Driver Safety Program](http://www.uvm.edu/safety/field/https%3A/www.uvm.edu/riskmanagement/driver-training-and-certification).

Include if fully remote upon start: The University agrees that commencing on your start date, you may perform the student leader role on a full-time basis from a non-UVM facility located in [City, State].  If you wish to perform the student leader role from a different location, you will need to submit a telework request and receive prior approval for a change in work location following the University’s telework policies and procedures.

Include if a background check is required for this student leadership role[[link to background check policy](https://www.uvm.edu/sites/default/files/UVM-Policies/policies/background_checks.pdf)]: This student leadership role is contingent upon the completion of a successful background check.

I look forward to seeing you on [DATE]. Prior to beginning employment, but no later than the first day of work, you must be prepared to complete an Employment Eligibility Verification Form (I-9), which is available online at <https://www.uvm.edu/hrs/forms>. Payroll and Tax Services will contact new and rehired employees with directions on how to update federal and state W4’s in People Soft Self Service, please do not attach paper forms.

Sincerely,

[Signature and title of the supervisor with authority to hire]

If you have questions about the terms of the internship outlined above, please contact the Internship Coordinator at the Career Center at 802-656-3450.

We look forward to hearing from you by [DATE], after which time this offer is no longer valid. If your decision is to accept this internship, as stated above, please indicate your acceptance by signing a copy of this notification letter and returning it to:

[Department Representative Name]

[CAMPUS ADDRESS]

UNIVERSITY OF VERMONT

BURLINGTON, VT 05405

ACCEPTANCE:   I accept the offer as outlined above.

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Signature Date