*Visiting Fellow Reappointment Template:*

*Purpose: This template is to be used when renewing a visiting fellow for an additional term. Its purpose is to document the salary for the new term, reiterate expectations or document any changes in expectations, and remind the fellow (and unit) of the five year limit.*

Dear Dr./Ms./Mr. Fellow:

This letter is to notify you that we would like to reappoint you as a [Visiting Post-Doctoral Fellow or Visiting Research Fellow] in the Department/Institute/Program/Center of \_\_\_\_\_ for an additional year effective \_DATE\_ through \_DATE\_.

Your stipend for this year will be $\_\_\_\_\_\_\_ and will continue to be funded by your home institution. The UMSOM Scholar Fellow Policy allows for renewals up to a maximum of 5 years in the School. Given your past employment, you have the potential for [5/4/3/2/1] years of appointment remaining. Your appointment as [Visiting Post-Doctoral Fellow/ Visiting Research Fellow] will end when support from your home institution ends, when you resign or after notice of termination per the UMSOM Scholar Fellow Policy, whichever is sooner. For information regarding your leave balance, check with [enter name of appropriate administrator]. Renewal for an additional term (up to a maximum of five years) will depend on laboratory needs, and your performance. [If fifth annual term] This will be the last year of your appointment as a visiting fellow. Therefore your appointment will end on \_DATE\_.

You will continue to work in Dr. PI’s lab and will [include expectations for current year].

The University of Maryland School of Medicine [Scholar Policy](https://www.medschool.umaryland.edu/media/som/offices-of-the-dean/academic-administration/docs/fellows/ScholarFellowPolicy1124.pdf)  establishes guidelines for your appointment.

As a condition of employment, all fellows in the School of Medicine are expected to meet the credentialing and/or occupational health standards required by their job duties.

In addition to the assistance available to you via your mentor’s departmental office, the School of Medicine’s [Office of Postdoctoral Scholars](http://medschool.umaryland.edu/postdoc/) (<http://medschool.umaryland.edu/postdoc/>) is always available to assist you throughout the course of training period and is dedicated to helping you meet your individual career goals.

[If fellow on visa include the following paragraph] Please be aware that this offer is contingent on your maintaining appropriate lawful status and authorization to work in the United States for the period of appointment. Expiration of such status is grounds for termination of the appointment.

Thank you for your contributions to our department and the school.

Sincerely,

CHAIR/DIRECTOR

Visiting Fellow’s Signature Acknowledging Reappointment Date