



Letter of Appointment Salaried Employment Agreement

Nevada System of Higher Education
University of Nevada Las Vegas



Date:

Employee Name:

This agreement summarizes compensation and conditions of employment at University of Nevada, Las Vegas.

Position Information

Supervisory Organization:

Department:

Agreement Start Date:

Agreement End Date:

Total Compensation Amount:

Compensated Activity:

Temporary and/or part-time letters of appointment are considered part of the professional staff as defined by the Nevada System of Higher Education Code.

Conditions of Employment

Notwithstanding any provision of the Nevada System of Higher Education Code, including but not limited to Section 5.9, this is a temporary appointment only and will not be continued beyond the ending date. The employee is not entitled to additional employment in the future. This appointment may be terminated at will, without notice; employee has no appeal rights. The Nevada System of Higher Education reserves the right to correct clerical errors that may occur and deduct any overpayments from future paychecks.

In consideration of a portion of revenues that accrue from Intellectual Property, as defined in the Intellectual Property, Research, and Entrepreneurial Activity Policy (the "Policy"), Title 4, Chapter 12 of the NSHE Handbook, in accordance with the Policy, I agree to assign and do hereby assign any Intellectual Property to NSHE for which NSHE has an ownership interest pursuant to the Policy.

Any other terms, understandings, promises, prior negotiations or representations, or conditions not specified in this agreement, or made a part of this letter of appointment, shall not be considered a part of this letter of



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appointment. This letter of appointment is not binding or of any legal effect until approved by an authorized representative and accepted by the employee.

Per the [Emergency COVID-19 Employee Vaccination Policy](#), all NSHE employees must be vaccinated against COVID-19 or have an approved medical or religious waiver request. All candidates for employment must have this information on file with Human Resources prior to their start date.

To submit your proof of completed vaccination series, complete the [COVID-19 Proof of Vaccination](#) for New Hires form.

To submit a waiver request, complete the [Medical Condition Waiver](#) Request or the [Religious Belief Waiver](#) Request. The waiver request and any supporting documentation should be submitted to Human Resources via the [Request for Waiver form](#).

Questions regarding the vaccination policy may be sent to hrvax@unlv.edu.

I agree

Print Name: _____

Date: _____

Signature: _____