

INSTRUCTIONS: After making a verbal job offer to a successful candidate, a written offer of employment should be prepared using the following draft. Please ensure that the required forms are included with the offer letter you send to the candidate. *Please keep in mind that this employment offer letter communicates salary information and terms of employment and should be handled in a confidential manner.* If you have any questions about the preparation of this letter or if you need assistance in preparing the letter, please contact Human Resources (X3369).

Date

Name
Street Address
City, State, Zip Code

Dear (Insert person's name):

To confirm our recent conversation, I am pleased to offer you an initial position as the (regular or temporary) (full-time or part-time) (position title) at the University of Puget Sound. As we discussed, your initial annual base salary will be (insert annual base salary), or (insert monthly salary) per month through June 30, ____ (to be determined in consultation with Human Resources). **(For those hired into benefits eligible positions that are less than year round, please insert the following sentence:** You will be paid for [insert number of months worked] months of work over a twelve month period of time.) As a new member of the Puget Sound staff, you will serve a six month initial evaluation period.

Your starting date will be (insert start date). On that date, please report at 8:00 a.m. to the Human Resources Department at 1218 North Lawrence, where you will be provided with a packet containing information on University benefits, facilities, and services and invited to attend an orientation program.

The Immigration Reform and Control Act of 1986 and the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 require that all employers obtain documentation within the first three days of an individual's employment to verify eligibility for employment in the United States. Documentation acceptable by the United States Citizenship and Immigration Services is listed on the attached sheet. To insure compliance with the Acts, please bring original copies of your documentation to the Human Resources Department on your first day of employment.

(Insert the following paragraph if the successful candidate lives outside of the Seattle/Olympia area).

The University will cover the full cost of moving household goods up to \$1,500 and one-half of expenses beyond the initial \$1,500, up to a maximum reimbursement of \$3,000. In order to qualify for this reimbursement your move must take place within thirty (30) days of your start date. Please submit your original receipts along with the enclosed Request for Moving Expense Reimbursement form to me when your move is completed.

As a formal indication of your acceptance of this position, please sign the enclosed copy of this letter in the space below and return it along with your completed W-4 and Demographic Information for New Faculty/Staff Members forms in the enclosed addressed, postage-paid envelope as soon as possible. Again, congratulations, (insert candidate's name); I'm looking forward to working with you.

Sincerely,

Department Head's Signature
Title

Vice President/Dean's Signature
Title

Enclosures

cc: Human Resources Department

I understand that I may voluntarily terminate my employment. I further understand that I may be terminated involuntarily at will, with or without cause or prior notice, at any time, regardless of any other documents or oral or written statements issued by the University or its representatives. With this understanding, I accept the (regular or temporary) (position title) position with the terms as stated above.

Signature: _____ Date: _____

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VERIFICATION OF ELIGIBILITY FOR EMPLOYMENT

The Immigration Reform and Control Act of 1986 and the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 require that all regular staff members hired by the University of Puget Sound provide documentation to verify eligibility for employment in the United States. This verification should be presented to the Human Resources Department on your first day of employment, but no later than the third business day after hire.

In order to prove identity and eligibility for employment in the United States, the Act requires you to allow examination of one of the following documents:

- a. **United States Passport (expired or unexpired)**
- b. **Unexpired foreign passport, with I-551 stamp or attached Form I-94 indicating unexpired employment authorization**
- c. **Permanent Resident Card or Alien Registration Receipt Card with photograph (USCIS Form I-151 or I-551)**
- d. **Unexpired Temporary Resident Card (USCIS Form I-688)**
- e. **Unexpired Employment Authorization Card (USCIS Form I-688A)**
- f. **Unexpired Employment Authorization Document issued by USCIS that contains a photograph (USCIS Form I-688B)**

If you do not have one of the documents listed above, these Acts require that you provide two documents (one from the identity list and one from the employment eligibility list which follow) for examination and verification of identity and employment eligibility:

Identity Documentation

- a. **A driver's license or I.D. card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address**

Employment Eligibility Documentation

- a. **Social Security Card**

Please bring the appropriate documentation of your eligibility for employment to the Human Resources Department on your first day of employment. In order to comply with these laws we must have your cooperation.

If you have any questions, please feel free to contact Rosa Beth Gibson, Associate Vice President of Human Resources or Caitlin Rantschler, Employment Coordinator by calling (253) 879-3369.

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Form W-4 (2007)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

Exemption from withholding. If you are exempt, complete **only** lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2007 expires February 16, 2008. See Pub. 505, Tax Withholding and Estimated Tax.

Note. You cannot claim exemption from withholding if (a) your income exceeds \$850 and includes more than \$300 of unearned income (for example, interest and dividends) and (b) another person can claim you as a dependent on their tax return.

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 adjust your withholding allowances based on

itemized deductions, certain credits, adjustments to income, or two-earner/multiple job situations. Complete all worksheets that apply. However, you may claim fewer (or zero) allowances.

Head of household. Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 919, How Do I Adjust My Tax Withholding, for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax

for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 919 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners/Multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others.

Nonresident alien. If you are a nonresident alien, see the instructions for Form 8233 before completing this Form W-4.

Check your withholding. After your Form W-4 takes effect, use Pub. 919 to see how the dollar amount you are having withheld compares to your projected total tax for 2007. See Pub. 919, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for yourself if no one else can claim you as a dependent	A _____
B	Enter "1" if: <ul style="list-style-type: none"> • You are single and have only one job; or • You are married, have only one job, and your spouse does not work; or • Your wages from a second job or your spouse's wages (or the total of both) are \$1,000 or less. 	B _____
C	Enter "1" for your spouse . But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)	C _____
D	Enter number of dependents (other than your spouse or yourself) you will claim on your tax return	D _____
E	Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above)	E _____
F	Enter "1" if you have at least \$1,500 of child or dependent care expenses for which you plan to claim a credit	F _____
G	Child Tax Credit (including additional child tax credit). See Pub 972, Child Tax Credit, for more information. <ul style="list-style-type: none"> • If your total income will be less than \$57,000 (\$85,000 if married), enter "2" for each eligible child. • If your total income will be between \$57,000 and \$84,000 (\$85,000 and \$119,000 if married), enter "1" for each eligible child plus "1" additional if you have 4 or more eligible children. 	G _____
H	Add lines A through G and enter total here. (Note. This may be different from the number of exemptions you claim on your tax return.) ▶	H _____
	For accuracy, complete all worksheets that apply. <ul style="list-style-type: none"> • If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the Deductions and Adjustments Worksheet on page 2. • If you have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$40,000 (\$25,000 if married) see the Two-Earners/Multiple Jobs Worksheet on page 2 to avoid having too little tax withheld. • If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below. 	

----- Cut here and give Form W-4 to your employer. Keep the top part for your records. -----

Form W-4 Department of the Treasury Internal Revenue Service	<h2 style="margin: 0;">Employee's Withholding Allowance Certificate</h2> <p style="font-size: small; margin: 0;">▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</p>	OMB No. 1545-0074 <div style="font-size: 2em; font-weight: bold; border: 1px solid black; padding: 5px; display: inline-block;">2007</div>
1 Type or print your first name and middle initial. Last name		2 Your social security number
Home address (number and street or rural route)		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. <i>Note.</i> If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.
City or town, state, and ZIP code		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. <input type="checkbox"/>
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)		<div style="border: 1px solid black; padding: 2px; display: inline-block;">5</div>
6 Additional amount, if any, you want withheld from each paycheck		<div style="border: 1px solid black; padding: 2px; display: inline-block;">6 \$</div>
7 I claim exemption from withholding for 2007, and I certify that I meet both of the following conditions for exemption. <ul style="list-style-type: none"> • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here		<div style="border: 1px solid black; padding: 2px; display: inline-block;">7</div>
Under penalties of perjury, I declare that I have examined this certificate and to the best of my knowledge and belief, it is true, correct, and complete.		
Employee's signature (Form is not valid unless you sign it.) ▶		Date ▶
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)		9 Office code (optional) 10 Employer identification number (EIN)

DEMOGRAPHIC INFORMATION FOR NEW FACULTY/STAFF MEMBERS

Now that you have officially accepted a position with the University of Puget Sound, please provide the following information. This information is needed to establish a payroll record for you and to implement network access for you. This information is needed as soon as possible.

Social Security Number: _____

Legal Name: _____
(As Stated on Your Social Security Card)

Preferred Name: _____

Date of Birth: _____

Gender: Female
 Male

Ethnicity: White
 African or African American
 Hispanic or Hispanic American
 Native American or Alaskan Native
 Asian or Asian American

Citizenship: I am
 A citizen or national of the United States
 A lawful Permanent Resident
 An alien authorized to work

REQUEST FOR MOVING EXPENSE REIMBURSEMENT

NAME: _____

HOME ADDRESS: _____

HOME PHONE: _____ SOC. SEC. NUMBER: _____

DEPT. PHONE: _____ DEPARTMENT: _____

DATES OF MOVE: _____

FORMER HOME ADDRESS: _____

FORMER WORK ADDRESS: _____

If the University is not located at least 50 miles farther from your former home than your former home was from your former job location, then this reimbursement will be considered taxable income according to Internal Revenue Service regulations.

Complete appropriate categories and attach **original** receipts to this form.

AMOUNT

Air Fare:	
Moving Van/Trailer Rental:	
Lodging:	
Postage/Shipping:	
Supplies (i.e., tape, wrapping paper)	
Tolls/Fares/Parking Fees	
Gasoline OR Mileage: Number of Miles: @\$\$.20/mile _____	
Other (specify) _____	

TOTAL EXPENSES CLAIMED: _____

 Faculty/Staff Member's Signature Date _____

 Academic Vice President/Human Resources Signature Date _____

FOR DEPARTMENTAL USE ONLY

REIMBURSEMENT: _____ BUDGET NUMBER: .61800

POSITION TITLE: _____

DATE PROCESSED: _____

MOVING EXPENSE REIMBURSEMENT POLICY

The University of Puget Sound seeks to reduce the financial impact of relocation upon new faculty and exempt staff members. For that reason, the University will cover the full cost of moving household goods up to \$1,500 and one-half of expenses beyond the initial \$1,500, up to a maximum reimbursement of \$3,000. If, for example, an individual's moving expenses totaled \$2,356, the reimbursement would be \$1,928 (\$1,500 in full and \$856 at 50%). **Original** receipts for all moving expenses must be attached to the **Request for Moving Expense Reimbursement form (on reverse side)** and submitted at the time the move is complete. The University's moving expense reimbursement policy covers only those items listed on the reimbursement form. Expenses such as meals, househunting trips, car repairs, veterinary bills, etc., will not be covered under moving expense reimbursement. Reimbursement requests should be submitted to the Academic Vice President's Office (faculty) or the Human Resources Department (staff) for approval and processing within thirty (30) days of the individual's start date. If you have any questions regarding the completion of this form, contact the Academic Vice President's Office (253-879-3205) or the Employment Consultant (253-879-3461).