



**Vice Chancellor for Research Office
REAPPOINTMENT
NON-SENATE ACADEMIC TERM APPOINTEES**

NAME: _____ **UNIT:** _____

CURRENT APPOINTMENT:

TITLE: _____ Step: _____ Title Code: _____
 Annual Salary: \$ _____ MO Salary: \$ _____ Time: _____ %
 BEGIN Date: _____ END Date: _____ Date of Last Review: _____
 U.S. Citizen Permanent Resident Country: _____ Visa Type _____ Visa End Date _____

PROPOSED REAPPOINTMENT TERMS:

TITLE: _____ Step: _____ Title Code: _____
 Annual Salary: \$ _____ MO Salary: \$ _____ Time: _____ %
 BEGIN Date: _____ END Date: _____ Date of Next Review: _____
 U.S. Citizen Permanent Resident Country: _____ Visa Type _____ Visa End Date _____

GENERAL RESPONSIBILITIES:

FUNDING SOURCE:

%	Funding Agency	Agency Type	Fund	Org	Program	Project	Flexfield
Funding for visa fees, if different from above:							

COMMENTS:

REAPPOINTMENT APPROVAL:

 PRINCIPAL INVESTIGATOR Date SUPERVISOR (If different from PI) Date

 DIRECTOR Date ASSOCIATE VICE CHANCELLOR FOR RESEARCH Date

NOTICE TO APPOINTEE:

In accordance with APM 137 (<http://www.ucop.edu/acadadv/acadpers/apm/apm-137.pdf>), this is a term appointment, which is self-terminating on the end date stated. By signing this document you agree to the terms of this appointment as described above. Your supervisor will be: _____. We hope you will accept this appointment and look forward to your continued involvement with the University of California, Berkeley.
