DATE

NAME

ADDRESS

Dear NAME,

It is my pleasure to offer you a position as Research Associate (Clinical) in order to pursue research and scholarship in the Department/Institute of XXXXX. As you are not an employee of Dartmouth College, please note that this appointment does not entitle you compensation or to benefits through Dartmouth College. Research Associates are non-faculty members of the academic community at Dartmouth who are here to obtain training. You will be working under the supervision of Dr. XXXXX on projects [brief description of research program]. Your initial appointment is for a period of XX years.

**Optional**: This appointment requires a PhD degree. As you have not yet been formally awarded your PhD, please have the Dean of your current graduate school provide a letter attesting that you have completed all of the formal requirements for this degree and the expected date of degree conferral. *(This may not apply to all research associates; some may hold masters degrees, and this language is not needed for those who clearly hold a PhD.)*

As a member of the academic community of Dartmouth College, you will have access to the Dartmouth Library system, including *UpToDate*.  Your academic appointment will also provide you with a Dartmouth College netID, which provides you with a Dartmouth.edu email address that will automatically forward messages to your preferred email account.  The Dartmouth netID provides you access to important College systems. Additionally, your Dartmouth College photo ID card may qualify you for discounts from Dartmouth programs and facilities such as the Hanover Country Club, Hopkins Center for the Arts, Dartmouth Outing Club, Morton Farm, and the Dartmouth Skiway. Additional information for non-faculty academic personnel at Geisel can be found at <http://geiselmed.dartmouth.edu/faculty/fac_info/>.

Your academic title at Dartmouth shall terminate effective at the end of your term of appointment as a Research Associate (Clinical) or earlier should your activities associated with this visiting position at Dartmouth change or end prior to the date above. In addition, your academic title may also be terminated for cause. If you no longer hold an academic position with the medical school, all privileges that are associated with this position (e.g., your netID and access to Dartmouth’s libraries) will also terminate.

As a member of the academic community of Dartmouth College, you will be expected to comply with Dartmouth’s rules and policies including, but not limited to, policies on the [responsible conduct of research](https://www.dartmouth.edu/~osp/resources/RCR/), [patents, copyright and other intellectual property rights](file:///LPH%20folder/APT/Current%20templates/Templates%2011.2018/POLICY%20ON%20PATENTS%2C%20COPYRIGHTS%2C%20AND%20OTHER%20INTELLECTUAL%20PROPERTY%20RIGHTS), [conflict of interest](https://www.dartmouth.edu/~osp/resources/policies/dartmouth/cofinterest.html), [institutional diversity & equity (IDE)](https://www.dartmouth.edu/~ide/Diversity%20Mission%20Statement.html), and [sexual respect](https://sexual-respect.dartmouth.edu/). These policies, as well as specific policies and information on, but not limited to, Standards of Conduct for Teacher-Learner Relationships for Geisel faculty, professionalism in Undergraduate Medical Education (UME), and expectations for conflict of commitment and remote work agreements may also be found at the link for the [Geisel Faculty Handbook](http://geiselmed.dartmouth.edu/faculty/fac_info/). In addition, during the course of your faculty appointment, you may receive or become aware of confidential material, including employment information, financial data, medical information, trade secrets, and other non-public or proprietary information concerning Dartmouth College, its employees, its students, and its donors. Please be aware that the Dartmouth’s Confidentiality Policy prohibits the use and disclosure of this information, except as necessary to perform the requirements of your employment.

As you will carry out your research efforts in space located at the Lebanon site of Dartmouth Hitchcock Medical Center (DHMC), we ask that you also please read and understand the information related to their policies governing professional responsibilities and behavior.

You are also expected to obtain any necessary training or certification required for your activities at Dartmouth including, but not limited to, those required by Title IX, Environmental Health & Safety, the Animal Care and Use Committee, or the Committee for Protection of Human Subjects.

NAME, we are delighted you will be joining us this MONTH OF START DATE. We anticipate that your work with us in [Area of Endeavor/Specifics of Project] shall be in advancing [FIELD] and we look forward to this fruitful collaboration.

Sincerely,

CHAIR’S NAME PI NAME (optional)

NAME OF DEPARTMENT NAME OF DEPARTMENT

On behalf of the Trustees of Dartmouth College

By signing below, I indicate that I understand and agree with the contents of this letter and that I accept the offer in the Department of DEPARTMENT at the Geisel School of Medicine at Dartmouth.

Please sign, date, and return the original letter by [RESPONSE DATE].

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 SIGNATURE (NAME) DATE