



Postdoctoral Early Termination for Loss of Funding Letter Template

(please copy and paste text to Supervisor's letterhead or remove all references to "letter template" before using)

[DATE]

[POSTDOC NAME]

[ADDRESS]

[CITY,STATE,ZIP]

Dear [NAME]

Please be advised that your appointment as a Postdoctoral Appointee in [DEPARTMENT] will terminate effective [DATE]. As indicated in your offer letter, your position is funded by [FUNDING SOURCE]. While we originally anticipated that this funding would continue through the term of your appointment, that funding will be ending early, as of [DATE].

[If there is more than 60 days before the funding ends:] Your appointment will therefore terminate effective [TERM DATE].

[If there is less than 60 days before the funding ends:] The Postdoctoral Appointment Policy requires that we provide you at least sixty days advance notice of the termination of your appointment due to loss of funding. Therefore, your appointment will terminate on [TERM DATE].

Your health insurance and other benefits will be paid through the end of your employment on [DATE]. If you have any questions regarding your health insurance benefits please contact Garnett-Powers & Associates at 1-844-243-0027 or URPD@Garnett-Powers.com. Additionally, the Employee Assistance Program (EAP) is available to you by calling 475-0432.

We wish you the best in your future endeavors.

Sincerely,

[Supervisor's Name, Title]

Date

[Department Chair or Center Director]

Date

If applicable: [Funding PI Name, Title]

Date



SCHOOL OF MEDICINE & DENTISTRY
UNIVERSITY *of* ROCHESTER MEDICAL CENTER

cc: Senior Associate Dean for Graduate Education