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DATE

Visiting Scholar/Faculty Name

Department

Home institution name

Address

Dear NAME:

Upon the review of the recommendation of Professor [name], I am ­extending the invitation for you to continue as a Visiting [Scholar/Faculty] in the [department] at the [college] at Northeastern University’s Boston Campus (“Northeastern”), to [conduct research] from [start date] to [end date].

I understand that you continue to maintain status as a [position] at [name of institution/entity and city/state/province/country],and will continue to remain employed at [name of institution/entity] while you are a Visiting [Scholar/Faculty] at Northeastern. If your affiliation with [name of institution/entity] changes, you are required to notify [name of college contact] immediately. At all times during the period of this visiting appointment, you will be responsible for the payment of your travel and living expenses, including health care, through non-Northeastern sources.

During your extended time at Northeastern, you will be paid total of [$XX], at the hourly rate of [$XX], payable in [weekly/bi-weekly/twice a month] installments over the period of your visit.

The Office of Global Services (OGS) collaborates with Northeastern’s academic departments and colleges to support visiting scholars and faculty who are hosted at Northeastern to engage in their research objectives. OGS offers a variety of cultural events and programs throughout the year that we invite you to continue to learn about and to participate in to enrich the quality of your experience at Northeastern and in the United States.

The HRM contact in your college will initiate a request to OGS to extend your DS-2019 to match your extended Visiting [Scholar/Faculty] appointment end date. As part of that process, you will receive a request to provide information to OGS to confirm continued maintenance of your J-1 visa status. **It is your responsibility to ensure that your DS-2019 program extension is completed prior to your current DS-2019 end date.** Upon approval of the DS-2019 program extension, OGS will issue you an updated DS-2019 reflecting the end date of your Northeastern Visiting [Scholar/Faculty] appointment. OGS will also reverify your I-9 through the new end date, showing your continued work authorization required to remain on payroll. Please continue to be in contact with OGS for any questions related to your J-1 visa status by emailing OGS\_Scholars@northeastern.edu.

All visiting scholars and faculty are expected to embrace and enforce a culture of safety in university activities and research. If your research or other academic activities (e.g., teaching laboratories, field work, travel) involve hazards to individuals or the environment, you are expected to uphold the Northeastern policy on environmental health and safety, the rules of university committees on safety, and best practices in your field or work.

As a leader in experiential learning, global engagement, and interdisciplinary research, the university’s commitment to excellence is unsurpassed. You will continue to find Northeastern a welcoming diverse community that focuses on the institution’s overarching mission: educating students for a life of fulfillment and accomplishment; and creating and translating knowledge to meet global and societal needs.

You are expected to continue to familiarize yourself with and abide by the Professional Standards and Business Conduct Policy and all other university policies and procedures that pertain to you. These policies may evolve over time and are subject to change. University policies can be found at www.northeastern.edu/policies.

In connection with your continued Visiting [Scholar/Faculty] appointment, you may be supplied with or have access to confidential and proprietary information relating to Northeastern. It is important for you to understand that any unauthorized or inappropriate use, appropriation, reproduction or disclosure of such information supplied by and relating to Northeastern is prohibited.

This letter represents the entire agreement between you and Northeastern, and supersedes any and all other prior written or oral agreements regarding this visiting appointment. The terms of this letter and appointment may only be amended or modified in writing by an authorized Northeastern representative.

We look forward to continuing to host you as a Visiting [Scholar/Faculty] in the [department] in the [college] at Northeastern’s Boston Campus. If the terms outlined above are acceptable, please sign this letter where indicated below and return to [HRM key contact name] (email address). If you have any questions, please feel free to contact Professor [name] at [email address, office location, phone number].

We look forward to welcoming you to Northeastern University.

Sincerely,

NAME

Dean or Associate Dean for Faculty

I accept all the terms of this continued appointment as set forth above and I agree to adhere to all of the policies and procedures of Northeastern University.

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| DATE |  | [Name of Visiting Scholar/Faculty] |