

(COMMUNITY COLLEGE /SYSTEM OFFICE LETTERHEAD)
FACULTY EMPLOYMENT CONTRACT
(Date)

(Name of Faculty Member)

This agreement is to appoint you as _____ at the rank of _____
at an annual salary rate of \$_____ for the period of _____ to _____ and \$
_____ for the period of _____ to _____. This agreement is
made in accordance with the requirements of the VCCS Policy Manual and applicable state and
federal law.

Your responsibilities may include work during the day, evening, weekend, or anytime college
programs are offered. Acceptance of employment includes acceptance of the general
conditions of employment set forth in the VCCS Policy Manual, System Office/
Community College policies, and the laws of the Commonwealth of Virginia.
Any additional conditions concerning this agreement are stated below.

The terms of this agreement are subject to the continued appropriation of sufficient funds
and the Governor's on-going authority in such matters.

If this agreement and any special conditions or assignments listed below are acceptable
to you, please sign, date, and return this copy of the form to me within _____ days from
the above date.

President's Signature

If I have an existing employment contract with the Virginia Community College System,
or one of its colleges, this contract will be considered an addendum to that existing contract.
This contract will not supersede any such existing employment contract in any way, unless
agreed to by the existing employing institution and any conflicts between such existing and
additional contracts will be construed in favor of the existing contract.

Date _____

Special conditions or assignments:

_____ One Year Appointment
of 3 Three Year Appointment
of 5 Five Year Appointment
_____ Tenured