Click or tap to enter a date.

Click or tap here to enter text.
via email correspondence: Click or tap here to enter text.

Dear Click or tap here to enter text.,

We are pleased to offer you employment with the University of California Merced. You will be working in the Click or tap here to enter text. Department as Click or tap here to enter text. and you will report to Click or tap here to enter text.. Your payroll title is Click or tap here to enter text., title code Click or tap here to enter text. and position number Click or tap here to enter text.. This position is represented by Choose an item. and is Choose an item. from overtime. Your Choose an item. limited appointment will commence on Click or tap to enter a date. with an Choose an item. salary of $Click or tap here to enter text.. Your limited appointment will not exceed 1000 hours; we anticipate this appointment to extend through Click or tap to enter a date.. Choose an item. Choose an item.

The University of California offers a variety of health, welfare and retirement benefits as described on the  [UCnet Benefits page](https://ucnet.universityofcalifornia.edu/compensation-and-benefits/index.html). You are eligible for participation in the UC health benefits and retirement programs in accordance with the [benefits eligibility requirements](https://ucnet.universityofcalifornia.edu/compensation-and-benefits/eligibility/index.html). You will have a 31-day period of eligibility to enroll in UC benefits but cannot enroll until after new hire paperwork is completed. Prior to enrolling, we recommend that you review [What To Do If You're A New Employee](https://ucnet.universityofcalifornia.edu/compensation-and-benefits/roadmaps/new-employee.html) as well as attend a [UCPath Benefits Webinar](https://ucnet.universityofcalifornia.edu/compensation-and-benefits/UCPath-webinars.html). Also, a Welcome Kit will be mailed to your home address. If you have any questions regarding benefits, please contact the benefits department at benefits@ucmerced.edu.

As a condition of employment, you will be required to comply with the University of California [Policy on Vaccination Programs](https://policy.ucop.edu/doc/5000695/VaccinationProgramsPolicy), as may be amended or revised from time to time. Federal, state, or local public health directives may impose additional requirements.

Under the Immigration Reform and Control Act of 1986, you are required to provide documentation to verify your legal right to work in the United States. Attached is a list of eligible documents.  Please bring in the required employment eligibility documents and be prepared to complete a new I-9 along with other UC Merced hiring/payroll documents.

Your signature accepting this position is needed to complete the hiring process. Please sign and return a copy to verify your acceptance of this position.

We look forward to your acceptance of this offer and your contribution to our program.

Sincerely,

Click or tap here to enter text.

Click or tap here to enter text.

I accept this offer of employment and the terms and conditions as stated in this letter.

Accepted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature Date

Human Resources Signature

CC: Payroll, Budget, Human Resource

**LISTS OF ACCEPTABLE DOCUMENTS**

**All documents must be UNEXPIRED**

Employees may present one selection from List A

or a combination of one selection from List B and one selection from List C.

|  |  |  |
| --- | --- | --- |
| **LIST A****Documents that Establish Both Identity and Employment Authorization** | **OR** | **LIST B LIST C****Documents that Establish Documents that Establish Identity Employment Authorization****AND** |
| **1.** U.S. Passport or U.S. Passport Card |  | **1.** Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address | 1. A Social Security Account Number card, unless the card includes one of the following restrictions:
	1. NOT VALID FOR EMPLOYMENT
	2. VALID FORWORKONLYWITH INS AUTHORIZATION
	3. VALID FORWORKONLYWITH DHS AUTHORIZATION
 |
| **2.** Permanent Resident Card or Alien Registration Receipt Card (Form I-551) |
| **3.** Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa |
| **2.** ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address |
| **4.** Employment Authorization Document that contains a photograph (FormI-766) | **2.** Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240) |
| **3.** School ID card with a photograph |
| 1. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:
	1. Foreign passport; and
	2. Form I-94 or Form I-94A that has the following:
		1. The same name as the passport; and
		2. An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or

limitations identified on the form. | **3.** Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal |
| **4.** Voter's registration card |
| **5.** U.S. Military card or draft record |
| **6.** Military dependent's ID card |
| **7.** U.S. Coast Guard Merchant Mariner Card | **4.** Native American tribal document |
| **5.** U.S. Citizen ID Card (Form I-197) |
| **8.** Native American tribal document | **6.** Identification Card for Use of Resident Citizen in the United States (Form I-179) |
| **9.** Driver's license issued by a Canadian government authority |
| **For persons under age 18 who are unable to present a document listed above:** | **7.** Employment authorization document issued by the Department of Homeland Security |
| **6.** Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under theCompact of Free Association Between the United States and the FSM or RMI |
| **10.** School record or report card |
| **11.** Clinic, doctor, or hospital record |
| **12.** Day-care or nursery school record |

**Refer to the instructions for more information about acceptable receipts.**

Form I-9 10/21/2019

SARS-CoV-2 (COVID-19) Vaccination Program

* New employees are required to complete a COVID19 self-attestation or declination form within 14 days of employment in the [WorkHealth Solutions Portal](https://webchartnow.com/mobilemed/webchart.cgi).

* Instructions for completing a COVID19 Vaccination Declination form in the WorkHealth Solutions Portal can be found [here](https://ucmerced.us1.list-manage.com/track/click?u=3bd3ea9929e329e294a806abb&id=f2e0e6521d&e=af97f0b839).

* Individuals interested in getting vaccinated can find a local vaccine clinic through the [MyTurn website](https://ucmerced.us1.list-manage.com/track/click?u=3bd3ea9929e329e294a806abb&id=e3fc31de3b&e=af97f0b839).

* For more detailed information, visit the [Vaccine Policy](https://ucmerced.us1.list-manage.com/track/click?u=3bd3ea9929e329e294a806abb&id=e971d693f5&e=af97f0b839) page.

**Frequently Asked Questions**

[UCOP Policy on Vaccination Programs & FAQs](https://ucmerced.us1.list-manage.com/track/click?u=3bd3ea9929e329e294a806abb&id=021fcf4fd7&e=af97f0b839). We ask that everyone in the Bobcat family [Do Your Part](https://ucmerced.us1.list-manage.com/track/click?u=3bd3ea9929e329e294a806abb&id=621d0a3e0f&e=af97f0b839) in supporting the health of our campus and community.

Thank you,

Human Resources