Revised: July 1, 2013

TEMPLATE COTERMINOUS TERMINATION DUE TO FUNDING –

By Hand Delivery or Return Receipt Delivery

Date

Faculty Member

Address

Dear Dr.\_\_\_\_\_\_\_\_\_\_:

Please be advised that your coterminous faculty appointment at the Rutgers (*School*) in the Department/Program of (*name*) as an (*academic title*) will end on (*date*). This is due to lack of funding in/with (*state funding source*).

We very much appreciate your contributions to (*School*) during your appointment here at Rutgers University, and wish you the very best in the future.

Sincerely,

[*Department Chair*]

 cc: \_\_\_\_\_\_\_\_\_\_\_\_\_, Dean

 Karen Muller, Director of Faculty Affairs

Received by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[*Faculty Member*]

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_