CONDITIONS OF EMPLOYMENT ACKNOWLEDGMENT FOR UNIVERSITY STAFF

Employee:                   Orientation Date:
Department Organization Code and Name: 
Start Date: 
Number of working hours per week: _____
Funding:
University Staff Type: O&A or M&P (circle one)
End Date of Position if Applicable: 
Is this a Restricted Position; Yes or No (circle one)

I understand and agree that any offer of University employment made to me, and any employment I begin, is conditioned on the terms enumerated below. I understand further that these are not all the aspects of my employment, that the University or the Commonwealth of Virginia may change any of these items at any time, and that my employment may be subject to any such changes.

1. I must complete Section 1 of Form I-9 no later than the close of my first day of work, and present identity and eligibility to work documents within three working days of my first day of work at the University. If I am not a U.S. citizen, I must also maintain current legal permission to work and to be present in the United States. (Immigration Reform and Control Act of 1986).

2. The disclosure to University Human Resources or to my department administrators of my social security number is required by law. The number will be used for income tax withholding, payroll, and other administrative purposes. If requested, I must present to the University’s Human Resource representative my social security card as evidence of my social security number. If I do not currently have a social security number, I will apply for one, and will provide University Human Resources evidence of the number received immediately.

3. Employees in a restricted position (as defined by University policy) are not eligible for placement rights under the University of Virginia Layoff Policy. Employees in restricted positions for a specific function, project or purpose have no guarantee of employment beyond their established end dates, and their re-employment is contingent on the need for services, the availability of funding and satisfactory performance. Employees in restricted positions funded from non-continuous sources have no guarantee of continued employment.

4. I must meet the physical requirements to perform the essential functions of the job and submit to physical examinations when lawfully and reasonably required.

5. The results of checks of my references, security suitability, or application information must be satisfactory to University Human Resources and/or the hiring department.

6. I understand that I am a “University Staff” employee and governed by all University HR policies applicable to University Staff.

7. I am subject to an initial probationary period as specified in University policy during which my employment may be terminated at any time, with or without cause. This provision will not apply if I have been hired from the University of Virginia Health System, without a break
in service, or other agency or institution of the Commonwealth of Virginia and I have previously completed the required probationary period.

8. I understand that I may be required to work overtime when in my manager’s discretion, it is reasonable and necessary. When possible, advanced notice will be provided.

9. If eligible, as defined by the Fair Labor Standards Act (FLSA), I consent to be compensated with overtime leave in lieu of overtime cash, or a combination thereof.

10. By law, employees eligible for Virginia Retirement System (VRS) or Optional Retirement Plan (ORP) benefits are required to contribute five (5) percent of creditable compensation to his or her member contribution account. Enrollment in VRS also provides basic group life and Virginia Sickness and Disability Program (VSDP) benefits at no additional cost. Enrollment in the ORP also provides basic group life and disability coverage through the University’s disability insurance carrier (The Standard Insurance Company) at no additional cost. [http://www.hr.virginia.edu/hr-for-you/faculty/fac-benefits/retirement-program-orp/]

11. Health care coverage is an optional University benefit; however if I do not waive coverage within 60 days of my date of hire, I will automatically be enrolled in employee-only Low Premium Health Plan coverage. I understand that in order to enroll myself (and my eligible dependents) or waive coverage in the University’s Health Benefits Plan, I must access the on-line benefits system, Benefits@ to make my elections within sixty (60) days of my hire date. If I am automatically enrolled in the employee-only Low Premium Health Plan coverage I will owe premiums due from the effective date. I understand any changes to my enrollment must be made within sixty (60) days of a Family Status Change or during an Open Enrollment Period using the on-line Benefits@ system.

12. I must notify University Human Resources of changes in my address to avoid the possibility of losing benefits.

13. Upon termination of employment, I must return all University property which has been issued to me.

14. I must maintain current licensure, certification or registration required by law for any position I hold at the University of Virginia.

15. Upon accepting employment at the University of Virginia, and by signing below, I agree to abide by all University of Virginia policies and procedures which apply to me. It is my responsibility to be aware of these policies and procedures. I am also aware that University policies and procedure may be changed from time to time by the Board of Visitors or University administration, and it is my responsibility to become aware of such changes in a timely manner.

16. I understand the term “salaried” is used for ease of reference only and does not, by itself, imply the University guarantees my continued employment. My employment is at all times subject to layoff or other termination in accordance with applicable University Staff HR policies. The results of the University’s criminal conviction checks must be satisfactory to University Human Resources.

17. I must participate in the University’s Drug/Alcohol Testing Program if I occupy a position which the University has determined requires drug/alcohol testing.

18. I must submit to fingerprinting and provide personal descriptive information to be forwarded to appropriate governmental agencies for the purpose of obtaining criminal history information if my position is deemed “sensitive” per Code of Virginia §2.2-1201.1.

19. I understand and agree that participation in automatic direct deposit of payroll checks is required by the University, and I agree to cooperate by providing necessary banking information.

20. Failure or refusal to sign the above conditions of employment may result in termination.

I HAVE READ ALL OF THE ABOVE AND I UNDERSTAND AND AGREE TO EVERY TERM.

Signature of Employee: ___________________________ Date: _____________

HR Consulting Services Representative: _______________________ Date: _____________