

UNIVERSITY OF WISCONSIN-SUPERIOR
Superior, Wisconsin 54880
(01-1200-08 9/99)

RE-APPOINTMENT AGREEMENT – APPLIED MUSIC

Name: _____

Home Address: _____

SSN: _____

Period of Appointment (inclusive dates): _____

Title: _____

Hourly Salary: _____ (applied lessons) Hourly Salary: _____ (classroom instruction)

Highest earned degree: _____

Accounts to be charged: _____

General duties and/or objectives to be accomplished:

Your continued appointment beyond the period stated in this agreement will be dependent upon the satisfactory performance of your duties and responsibilities.

I agree to accept this assignment and compensation subject to the above conditions.

Applied Music Employee

Date

Supervisor

Date

Cabinet Officer

Date

Forward signed form to Office of Human Resources

c: Music Department
 Payroll

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