



THE UNIVERSITY OF IOWA AND THE UNIVERSITY OF IOWA FOUNDATION AGREEMENT CONCERNING APPOINTMENT AND FUNDING FOR THE:

Name of Professorship/Chair/Deanship: _____

College/Unit: _____

Appointment Information

Name of Proposed Appointee: _____ Employee ID#: _____

Proposed Title: _____

Type of Appointment: Named Endowment _____ Named Temporary Fund _____

(see UIF Named Professorship _____ Professorship _____

Gift Recognition Chair _____

Guidelines) _____ Deanship _____

Type of Appointment: New _____ Renewal _____

Length of Appointment: _____ (specify time period) Start Date: ____/____/____ End Date: ____/____/____

Funding Information

Please identify the funding sources for this position (this may include UI Foundation accounts, UI accounts or a combination). Funding sources must meet the minimum levels. Funding sources at the minimum levels must be identified and approved before a faculty appointment is made. We hereby certify that any future disbursements from accounts noted below will comply with any and all use conditions as specified in the Donor Intent Document, and adhere to the University of Iowa and University of Iowa Foundation policies and IRS regulations.

FUNDING DETAILS

UI Foundation:

UIF Account Number _____ UIF Account Name _____

____-____-____-____

UIF Account Number _____ UIF Account Name _____

____-____-____-____

Additional UIF funding notes: _____

UI:

UI Master File Account Number

Fund - Org - Dept - Subdept - Grant Program - Fn

____-____-____-____-____-____

UI Master File Account Number

Fund - Org - Dept - Subdept - Grant Program - Fn

____-____-____-____-____-____

Additional UI notes: _____

Approved By

Nominating Collegiate Dean, the University of Iowa _____ *Date*

Susan J. Curry, Interim Executive Vice President and Provost, the University of Iowa _____ *Date*