Employer Letter of Intent

The following employer, __________________________________, by execution of this letter, states its intention to become a member of a not-for-profit corporation known as the National Physical Science Consortium, Incorporated.

This employer agrees as follows:

1. To pay an annual allowance of $20,000 per year per student supported, and NPSC's fee of $7,000, by December first of each year. To maintain support of the students selected for a period of up to six years, or until the student completes the Ph. D., whichever occurs first. (Note: the annual membership fee is subject to change annually by action of the Board of Directors of NPSC.)

2. To provide summer employment to each NPSC Fellow supported by the employer for (typically) the summer preceding graduate school enrollment and for the following summer. Changes in employment schedule may be negotiated with the Executive Director of NPSC if another schedule would better fit a Fellow’s program, as long as the change is acceptable to the employer.

3. To provide a mentor for each fellow.

Conditions:

An NPSC Fellow interning with an employer-supporter is subject to all the normal personnel procedures of that employer, including such requirements as security and background checks and clearances, compliance with workplace policies and practices, completion of standard employment documents, etc. The amount of a Fellow’s summer salary is at the discretion of the employer. Employers are not obligated to employ a Fellow for more than the two summers indicated in item 2 above. Employers may at their discretion terminate their support of a Fellow who fails to report for an arranged summer internship; who fails to make continual, normal progress toward the degree; whose program of study or research field changes to one not of interest to the employer; or who engages in misconduct. Employers are under no obligation to support any minimum number of Fellows.

____________________________________________________________
Authorized Employer Representative

____________________________
Date

____________________________
Address

____________________________
Email