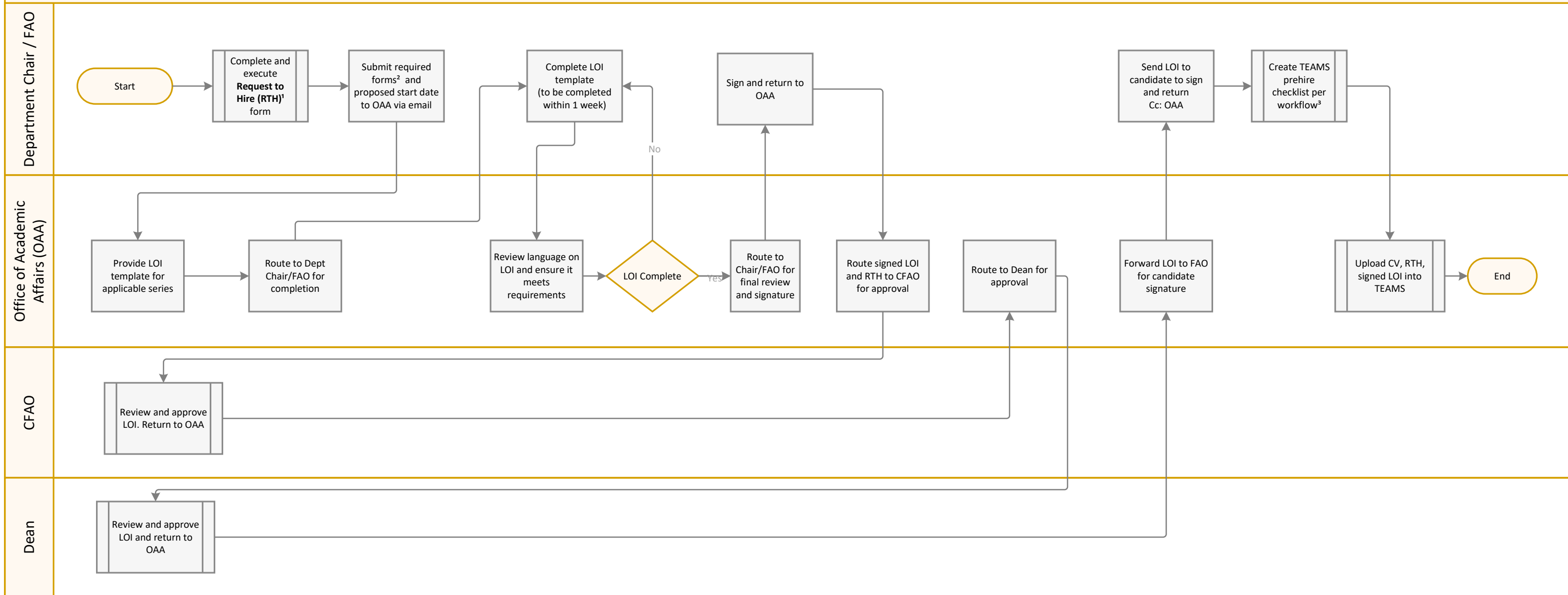


Letter of Intent (LOI) Process

Purpose: The purpose of this process is to outline the requirements and responsibilities for processing a Letter of Intent (LOI).



Notes:

¹See page 2 & 3 for forms

² Profoma – is required for Clinical new hires only. Request to Hire (RTH) – is required for both Senate and Clinical new hires

³ Document can be found on the Process Improvement SharePoint site: <https://medsch2.sharepoint.com/sites/PID/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2Fpid%2Fshared%20documents%2Facademic%20pre%2Dhire%20and%20on%2Dboarding&viewid=b0bb3259%2D5624%2D46bd%2D9669%2D8928c3a0b4d7>

REQUEST TO HIRE FORM			
HS CLINICAL FACULTY			
Department Name:		Date Prepared:	
Program:		Proposed Start Date:	
Specialty:		Candidate Name:	
Position: <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> New <input type="checkbox"/> Other		Funding Source(s) for Salary Summary	
<small>(If replacement or other, please specify)</small>		<small>(Please provide information on the anticipated agreement or revenue contract.)</small>	
Primary Practice Location:		Total	
Anticipated Percent Effort Distribution by Mission		Brief Synopsis:	
Clinical	<input type="text"/>	Dr. Garcia is replacing Dr. Nihira at 100% clinical	
Admin	<input type="text"/>		
Research	<input type="text"/>		
Teaching	<input type="text"/>		
Total Effort	100.00%		
<i>PLEASE ATTACH: 1) 3-Year Clinical Proforma; 2) NIGMA and AAAC Salary Benchmarks.</i>			
Miscellaneous Expenses		Space Requirements	
FAU		Location (Bldg, Floor, Rm) Silver Oaks	
Relocation expenses		New <input type="checkbox"/> Existing <input type="checkbox"/> Office <input type="checkbox"/> Cubicle <input type="checkbox"/>	
Furniture, keys		Other Space Needs: NA	
Computer and/or Telephone		Additional Comments:	
Lab coats, academic cards, Fax pads		Computer use is in clinic area. Appointment cards will be Health Science FAU	
Patient appointment cards			
Other (please specify)			
<i>Signatures and Approvals (all approvals must be obtained prior to initiating hiring process).</i>			
Requested by (FAO)		Date	
Department Chair		Date	
Chief Finance & Administrative Off		Date	
Donald W. Larsen, MD, MBA, MHA, FACI CEO, UCR Health		Deborah Deas, MD, MPH Vice Chancellor, Health Sciences Dean, School of Medicine CEO, Clinical Affairs	
Finance and Administration Office Use Only:			
TMS: FAU (*)		Confirmed by:	

Note: Editable version of this form can be found on the Process Improvement SharePoint site: <https://medsch2.sharepoint.com/sites/PID/Shared%20Documents/Forms/AllItems.aspx?id=%2Fsites%2FPID%2FShared%20Documents%2F%2FAcademic%20Affairs&viewid=b0bb3259%2D5624%2D46bd%2D9669%2D8928c3a0b4d7>

REQUEST TO HIRE FORM				
RESEARCH FACULTY & FACULTY WITHOUT CLINICAL EFFORT				
Department Name:		Date Prepared:		
Candidate Name:		Proposed Start Date:		
Proposed Rank:		Proposed Step:		
Position: <input type="checkbox"/> Replacement <input type="checkbox"/> New <input type="checkbox"/> Other		Position Type: <input type="checkbox"/> Ladder Rank <input type="checkbox"/> Non-Ladder Rank		
<small>(if replacement or other, please specify)</small>				
		Source	Amount X	Amount Y
Funding Source(s) for				
				Total: 50
Anticipated Percent Effort Distribution by Mission appropriate to ladder rank				
Admin		APU Scale		
Teaching, Research, Service				
Total Effort	100.00%			
Miscellaneous Expenses		FAU	Space Requirements	
Relocation expenses			Location (Bldg, Floor, Rm)	
Furniture, keys			New <input type="checkbox"/> Existing <input type="checkbox"/> Office <input type="checkbox"/> Cubicle <input type="checkbox"/>	
Computer and/or Telephone			Other Space Needs:	
Other (please specify)			Additional Comments:	
Approvals				
Requested by (FAO)		Date	Chief Finance & Administrative Officer	
			Date	
			Maria Aldana	
Division or Department Chair		Date	Deborah Deas, MD, MPH	
			Date	
			Vice Chancellor, Health Sciences	
			Dean, School of Medicine	
			CEO, Clinical Affairs	

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