

Kansas State University Agreement of Understanding for Overlapping Appointment

(Title)

(Position Number)

I understand that the appointment to the above position is temporary and will end upon the return of the employee currently serving active military duty. It is understood that this appointment carries with it no expectation of continuing employment in this position.

I accept this appointment and agree to be bound by the terms stated herein.

(Employee Signature)

(Date)

(Department Head Signature)

(Date)