

THE UNIVERSITY OF TEXAS MEDICAL BRANCH  
HOUSE STAFF WORK AGREEMENT  
NAME OF HOUSE STAFF

On the recommendation of Program Director of the Sample Program residency/fellowship, The University of Texas Medical Branch at Galveston (UTMB) is pleased to offer you a position as resident/fellow house officer at the postgraduate year \_\_\_ level, hereinafter referred to as PGY \_\_\_, subject to the following terms and conditions:

1. The period of your appointment as PGY \_\_\_ in this program will begin on \_\_\_/\_\_\_/\_\_\_ and end on \_\_\_/\_\_\_/\_\_\_. This appointment is contingent on satisfaction of state licensure requirements and the satisfaction of requirements for a J1 visa, if applicable. More detailed information about this appointment, including licensure/institutional permits, UTMB's policy on licensure exam requirements, DEA registration, and moonlighting is available in the GME Institutional Handbook.
2. Subject to your satisfactory participation in the residency program during the term of this Agreement, you will receive salary and benefits as established by UTMB for its house staff. As a house officer at UTMB, your salary is subject to all deductions required by state and federal law and such other deductions as you may authorize. More detailed salary and benefit information is available in the GME Institutional Handbook.
3. As a house officer at UTMB, you will be expected to perform such duties and responsibilities listed in your position description and as may be assigned to you, and to use your best efforts to provide safe, effective, and compassionate patient care. This includes maintaining confidentiality and professionalism in the appropriate use of social sites and postings as stated in Annex F to the GME Institutional Handbook. You must also comply with all rules and regulations of the Board of Regents of The University of Texas System (the "Regent's Rules"), UTMB policies and procedures, the applicable program requirements of the Accreditation Council for Graduate Medical Education (ACGME) for your specific residency program, and the basic responsibilities of a house officer as further detailed in the GME Institutional Handbook.
4. Appointment as a house officer at UTMB is for one year at a time. You will be notified at least four months prior to the conclusion of this appointment if your program does not intend to offer you an appointment for the following year (this does not apply if you are in the last year of training for your program.) If your program elects not to renew your appointment during the final four months of your appointment, you will be provided as much advance notice as reasonably possible under the circumstances. You also agree that you will notify your program director at least four months prior to conclusion of this appointment if you do not plan to continue in the residency program after this appointment ends.
5. Your performance as a PGY \_\_\_ will be reviewed and evaluated by the faculty of your. You acknowledge that you will be dismissed from the program during the term of this Agreement if your program faculty determine that your level of performance or professionalism does not meet the standards of the program and is unsatisfactory. Such dismissal shall be in accordance with the Regents' Rules and UTMB policies and procedures. More detailed information about house staff due process, including the applicable appeal and grievance policies and procedures, are available in the GME Institutional Handbook.
6. In the event any provision of this Agreement is held invalid, the remainder of this Agreement shall not be affected by such invalidity.

Please indicate your acceptance of the position as PGY \_\_\_ in the Sample Program residency/fellowship program and the terms and conditions set forth above by signing in the space indicated below and returning the signed Agreement to the UTMB Office of Graduate Medical Education. Your signature also indicates that you have read, understood, and agreed to the requirements contained in the GME Institutional Handbook, which has been provided to you. .

\_\_\_\_\_  
Signature of Program Director

\_\_\_\_\_  
Signature of House Officer  
Sample Program Residency Program

Original: Graduate Medical Education Office  
Copy: Program Director, House Staff Officer

\_\_\_\_\_  
Date Accepted (**must be filled in**)