Must be printed on departmental or faculty letterhead

Date	
Name: Address:	
Dear Dr. (Name of Postdoc),	
I'm delighted to inform you that your Postdoctora for the period of <i>mm/dd/yyyy</i> through <i>mm/dd/yyyy</i> supported by (<i>name of foundation or fellowship</i>) in you will receive no salary (or <i>other financial support</i> provide support in the amount of (<i>amount</i>) to meet I Scholars. In addition, I will provide (<i>amount</i>) for of (<i>amount</i>) (<i>if applicable</i>).	y. I understand you will continue to be the amount of (fellowship amount) and port) from MIT. (OR INCLUDE) I will MIT's salary guidelines for Postdoctoral
You will continue research on (provide detailed sentences).	l research description- minimum of 2
Bori Stoyanova (bori@mit.edu) and Roxana Hernathe Department of Chemical Engineering, are cohandle details of the extension process.	, ,
Since	rely,
Name Title	e of faculty