Today’s Date

New Hire’s First and Last Name

Street Number and Street Address

City, MO ZIP Code

Dear First Name:

Welcome! We are glad you are here.

As a land-grant institution, the University of Missouri has a responsibility to extend the work of the university to communities across the state. Through a network of county offices, MU Extension partners with people and communities to identify local interests and issues and offer relevant programming and resources to meet a community’s unique needs. MU Extension empowers Missourians to improve their lives, families, communities and businesses by providing evidence-based tools and resources to help solve Missouri’s grand challenges in economic opportunity, educational access and excellence, and health and well-being.

Add a few lines here specific to the program, region and/or office the person is joining.

As you begin your journey with MU Extension, please keep a few things in mind:

* We love what we do.  We hope you will too.  Improving the lives of Missourians through education is what we are about and serving them is a privilege.  We keep their needs and expectations in mind as we plan and execute our work.
* We are here to support your professional growth and development as a valued member of the team.
* Remain open to listening and learning.  Your team members have a wealth of knowledge and experience to share with you.
* Ask questions.  Any team member is willing to assist you in finding answers to your questions.
* Keep us informed and let us know how you are doing.  Whether you do not feel challenged enough or feel overwhelmed, let us know how we can support you.
* We value your input.  Bring your creativity, experience, innovation, opinions and thoughts to our discussions.  Together, we can always collaborate to find our way forward.

Here again, supervisors could keep these or customize them for their particular way of doing business.

Again, welcome to the team, we are excited to have you join us.

Sincerely,

Supervisor Name

Title

University of Missouri Extension

Region, Program or Department Name

Street Number and Street Name

City, MO ZIP Code

Enclosure (if needed)

cc: (if needed)