[Date]

[Employee Name]
[Employee ID]
[Department]

Subject: Notification of FLSA Status Reclassification and Salary Adjustment

Dear [Employee Name],

This letter is to inform you of a change regarding your position as [Job Title]. Following a recent review of your job duties and compensation in accordance with the Fair Labor Standards Act (FLSA) guidelines, your position has been reclassified.

Status Change:
Effective [Effective Date], your position will transition from **[Current Status: e.g., Exempt]** to **[New Status: e.g., Non-Exempt]**.

Salary Adjustment:
As part of this transition, your compensation has been adjusted to ensure compliance with regulatory requirements. Your new [Hourly Rate/Annual Salary] will be **$[Amount]**, effective [Date].

What this means for you:

- **Overtime Eligibility:** As a [New Status] employee, you are now eligible for overtime pay at a rate of 1.5 times your regular hourly rate for all hours worked in excess of 40 hours per workweek.
- **Time Tracking:** You will now be required to accurately record and submit all hours worked through [Name of Timekeeping System] for each pay period.
- **Pay Frequency:** [Optional: Mention if the pay schedule is changing, e.g., moving from monthly to bi-weekly].

Please note that this reclassification is based on federal and state regulations regarding job roles and pay thresholds. It does not reflect a change in your job responsibilities or the value of your contributions to [Company Name].

Please sign and return a copy of this letter to Human Resources by [Deadline Date] to acknowledge receipt of this notification. If you have any questions regarding these changes, please contact [HR Contact Name] at [Phone/Email].

Sincerely,

[Name]
[Title]
[Company Name]

Acknowledgment:

I acknowledge that I have received and understand the notification of my FLSA status change and salary adjustment.

Employee Signature: _____ Date: _____