

[Your Name]  
[Your Address]  
[Your Phone Number]  
[Your Email]

[Date]

[Supervisor's Name or HR Manager's Name]  
[Company Name]  
[Company Address]

Dear [Recipient Name],

Please accept this letter as formal notification that I am prepared to return to my position as [Your Job Title] following my Family and Medical Leave Act (FMLA) leave. My leave began on [Start Date of Leave].

I intend to resume my full-time duties effective [Date of Return].

I have attached the required Fitness-for-Duty certification from my healthcare provider, which confirms my ability to resume my job responsibilities. [Optional: Please note that my physician has outlined specific work restrictions or accommodations needed, which are detailed in the attached documentation.]

I look forward to returning to the team and catching up on my assignments. Please let me know if there are any specific procedures or paperwork I need to complete upon my arrival.

Sincerely,

[Your Signature]

[Your Printed Name]