

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

[Date]

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

Re: Intent to Return to Work from Short-Term Disability

Dear [Recipient Name],

I am writing to formally notify you of my intent to return to my position as [Your Job Title] following my short-term disability leave. My healthcare provider has cleared me to resume my duties effective [Date of Return].

[Select one of the following options:]

Option 1: I have been cleared to return to work full-time without any physical or medical restrictions.

Option 2: I have been cleared to return to work with the following temporary restrictions/accommodations: [List restrictions, e.g., reduced hours, lifting limits, etc.]. I have attached the medical documentation outlining these requirements.

I have attached the required medical release form from my physician confirming my fitness for duty. Please let me know if there are any additional steps or paperwork I need to complete prior to my start date.

I look forward to returning to the team and resuming my responsibilities.

Sincerely,

[Your Signature]

[Your Printed Name]