

[Your Name]
[Your Job Title]
[Your Employee ID Number]
[Date]

[Manager Name or HR Representative Name]
[Company Name]
[Department]

Subject: Request for Extension of Light Duty Assignment

Dear [Name],

I am writing to formally request an extension of my current light duty assignment, which is currently scheduled to end on [Current End Date].

As you are aware, I have been performing modified duties due to [mention brief reason, e.g., a workplace injury / a medical recovery process]. While I am making progress in my recovery, my healthcare provider has advised that I am not yet ready to return to my full, unrestricted job duties.

I have attached updated documentation from my physician, [Doctor's Name], which outlines my current physical limitations and recommends that I continue on light duty until approximately [New Proposed End Date].

I am fully committed to my recovery and to contributing to the team. I am happy to continue with my current modified tasks or discuss other ways I can assist the department within my medical restrictions. I plan to provide another medical update following my next follow-up appointment on [Date].

Thank you for your ongoing support and for considering this request.

Sincerely,

[Your Signature]
[Your Printed Name]

Attachment: Updated Medical Certification