

VOLUNTARY FURLOUGH AGREEMENT AND NOTICE

Date: [Insert Date]

To: [Employee Name]

Employee ID: [Insert ID Number]

Dear [Employee Name],

This letter confirms our agreement regarding your voluntary request to participate in the company's furlough program. We appreciate your willingness to support the organization during this time.

1. Furlough Period

Your voluntary furlough will begin on [Start Date] and is currently expected to end on [End Date]. Please note that this date is subject to change based on business requirements.

2. Employment Status

During this period, you remain an employee of [Company Name]. However, you are placed on an unpaid leave of absence. You are not permitted to perform any work, check company email, or perform any business-related tasks during the furlough period.

3. Compensation and Benefits

- **Pay:** You will not receive your regular salary or hourly wages during this period.
- **Health Benefits:** [Insert details regarding health insurance coverage and employee premium obligations].
- **Paid Time Off:** [Insert policy regarding accrual or use of PTO/Vacation time].
- **Unemployment:** You may be eligible for unemployment benefits. Please contact your state's unemployment office for eligibility details.

4. Return to Work

The company will provide you with at least [Number] days' notice regarding your return-to-work date. Please ensure the Human Resources department has your current contact information.

5. Acknowledgment

By signing below, you acknowledge that this furlough is voluntary and that you understand the terms outlined above.

Employee Signature

Date

Company Representative Signature

Date