

[Date]

[Employee Name]

[Employee ID]

[Department]

Subject: Notice of Phased Reduction in Work Hours

Dear [Employee Name],

This letter is to formally notify you of a scheduled reduction in your working hours. Due to [Reason for reduction, e.g., operational changes/seasonal demand/restructuring], your shift schedule will be reduced in the following phases:

Phase 1:

Effective Date: [Start Date]

New Weekly Hours: [Number of Hours]

Schedule: [Days/Times]

Phase 2:

Effective Date: [Start Date]

New Weekly Hours: [Number of Hours]

Schedule: [Days/Times]

Phase 3 (Final):

Effective Date: [Start Date]

New Weekly Hours: [Number of Hours]

Schedule: [Days/Times]

Please note that your compensation and benefits will be adjusted proportionally to reflect these new working hours. Specifically, [Mention impact on benefits, e.g., healthcare eligibility or PTO accrual].

We appreciate your contributions to the team and understand that this transition may require adjustments. If you have any questions regarding these changes, please contact [Name/Department] by [Date].

Sincerely,

[Your Name]

[Your Title]

[Company Name]

Employee Acknowledgment:

I acknowledge receipt of this notice and understand the changes to my work schedule as outlined above.

Signature: _____ Date: _____