

Date: [Insert Date]

To: [Employee Name]

Employee ID: [Insert ID]

Position: [Insert Job Title]

Subject: Notification of Light Duty Accommodation and Fitness for Duty Requirements

Dear [Employee Name],

We have received the medical documentation from your healthcare provider dated [Insert Date], which outlines temporary physical restrictions regarding your ability to perform your regular job duties.

Based on these recommendations, [Company Name] is pleased to offer you a temporary light duty assignment. This assignment is designed to accommodate your current medical restrictions while allowing you to remain productive during your recovery period.

Your temporary restrictions include:

- [Restriction 1, e.g., No lifting over 10 lbs]
- [Restriction 2, e.g., No prolonged standing]
- [Restriction 3, e.g., Limited use of right hand]

Light Duty Assignment Details:

- **Position:** [Insert Temporary Role]
- **Supervisor:** [Insert Name]
- **Schedule:** [Insert Hours/Days]
- **Start Date:** [Insert Date]
- **Estimated End Date:** [Insert Date, or "Until further medical review"]

Please note that you must not perform any tasks that exceed the restrictions set by your physician. If you are asked to perform a task that you feel violates these restrictions, you must notify [Name/HR Department] immediately.

Fitness for Duty Requirements:

Before you can return to your regular, unrestricted job duties, you are required to provide a "Fitness for Duty" certification from your healthcare provider. This certification must explicitly state that you are cleared to perform all essential functions of your original position, as outlined in the attached job description, without restrictions.

Please sign below to acknowledge that you have received this letter and understand the terms of your temporary light duty assignment.

Sincerely,

[Your Name]

[Your Title]

[Company Name]

Employee Acknowledgment:

I accept the temporary light duty assignment and agree to abide by the medical restrictions outlined above.

Signature: _____ Date: _____