[Date]

[Employee Name]
[Employee ID]
[Department]

Subject: Transition to On-Site Work Requirement

Dear [Employee Name],

As we continue to evolve our operations following the transition period brought about by the COVID-19 pandemic, we are writing to formally notify you of a change to your current work arrangement. Since [Date], you have been performing your duties in a remote capacity. We are now transitioning your role back to an on-site position.

Effective [Effective Date], your primary work location will be [Office Address/Building Name].

Your work schedule will be as follows:
[Days of the week, e.g., Monday through Friday]
[Working hours, e.g., 9:00 AM to 5:00 PM]

We understand that returning to the office after a long period of remote work may require personal adjustments. We recommend using the time between now and your start date to finalize any necessary arrangements regarding commuting or personal schedules. If you have specific concerns regarding health accommodations or childcare, please contact the Human Resources department by [Deadline Date].

We look forward to having you back in the office and appreciate your continued dedication to [Company Name]. Please sign and return a copy of this letter to acknowledge receipt of this notification.

Sincerely,

[Your Name]
[Your Title]
[Company Name]

Acknowledgment:

I acknowledge that I have received this notice and understand the requirements for my return to on-site work.

_____
[Employee Signature]

[Date]