

Transitional Job Offer

Dear _____ :

We are pleased to offer you temporary transitional work as part of

Return to Work Program, while you are recovering from your injury. It is our goal that this temporary assignment will aid in your transition back into full work activities. Your doctor, _____, has released you to perform certain work activities, which we have available for you.

Start Date: _____

Planned Work Schedule: _____

Supervisor Name: _____

Job Title/Tasks: _____

Report any difficulty in performing the tasks you are assigned to your supervisor immediately. Your wage and benefits for this temporary transitional position will be paid according to company policy and _____ workers' compensation laws.

We look forward to your return to work at _____ on _____, and ask that you check in with _____.

Please contact me if you have any questions or to discuss this further. We ask that you respond promptly to this job offer by signing the written acknowledgement at the bottom of this letter.

Return the original copy of this letter to me by _____ and retain a copy for your records as well. **Note:** if we do not receive this acknowledgement form from you by this date, your rights to further workers' compensation benefits may be affected.

Sincerely,

I acknowledge receipt of this letter and offer of temporary transitional work by way of my signature below.

Employee Signature _____

Date _____

Please be advised: This is a sample only. It is provided for educational purposes only. Employment laws and regulations vary from state to state, and this sample is not a substitute for legal advice on any specific situation and is not to be construed as legal advice.