Date

Employee Name

Address

Address

Dear Employee,

We are truly sorry to hear about your work-related injury. Each and every employee is a valuable resource and we want to provide you with the best possible treatment. This includes providing **Light Duty** work when the Doctor applies restrictions to your physical capabilities. I am pleased to formally offer you a modified work project/assignment until you are physically able to return to your normal duties.

Your start date is Monday, June 2 at 8:30am.

Your light duty job is a project creating an Employer/Co-Worker Training Program and occasionally assorted clerical duties that can be completed with one hand. The position is located at [ ] The hours are 8:30am – 5:00pm Monday through Friday with a half hour lunch and a pay rate of $X.XX/hour.

Please sign where indicated on the second page stating that you accept the light-modified duty transitional work and return this form to me by first class mail.

This offer of available modified duty in no way constitutes an employment agreement and in no way voids at will employment status.

Thank you,

Staffing Company Rep Name

# LIGHT DUTY

# WORK ASSIGNMENTS

When you are on a Light Duty assignment in the office you will be expected to:

1. Report to your assigned workstation, or location, on time.
2. Do the work that is expected of you for the assignment you have received. You will be supervised or tested as to your performance.
3. Take breaks and lunch only when you are assigned to do so.
4. Return from break and lunch on time.

When you are on a Light Duty assignment in the office you will not be allowed to:

1. Take extra breaks (Unless you have a Doctors note to permit such)
2. Walk through the office or premises to talk with other workers.
3. Sit in the break room and talk, unless during scheduled breaks.

While on a Light Duty assignment, all policies and procedures of this company are in effect and will be implemented. If you do not follow these policies and procedures, as you would under normal working conditions, you will be subject to disciplinary action.

**LIGHT DUTY ASSIGNMENT**

(This is where you list the job requirements and expectations.

I have read the above policy, and my Light Duty assignment as noted above. I was given the opportunity to ask questions about anything that was not clear to me. I have been offered this work to accommodate my restrictions. I also understand and accept as part of my employment that this is the policy of my employer.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Accept [ ] Decline - this job offer

Print Name above

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Employee Signature Date