

Return to Work Clearance

Date: [Insert Date]

To: [Employee Name]

[Employee Address]

Subject: Return to Work Clearance

Dear [Employee Name],

We are pleased to inform you that you have been cleared to return to work following your medical leave. Your healthcare provider has indicated that you are fit to resume your duties as of [Insert Return Date].

Please ensure you report to [Insert Workplace Location] at [Insert Time] on your return date. If there are any accommodations or adjustments needed to facilitate your transition back to work, please do not hesitate to reach out to your supervisor or the HR department.

Welcome back, and we look forward to seeing you again!

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Company Phone Number]

[Company Email Address]