Occupational Health Fitness-for-Duty Evaluation

Date: [Insert Date]

To: [Employee's Name]

Address: [Employee's Address]

Dear [Employee's Name],

Subject: Fitness-for-Duty Evaluation Results

We are writing to inform you of the results of the recent fitness-for-duty evaluation conducted on [Insert Evaluation Date]. The evaluation was performed to assess your ability to perform your job responsibilities safely and effectively.

Evaluation Details:

• Evaluator: [Evaluator's Name]

• Job Title: [Employee's Job Title]

• Department: [Employee's Department]

Based on the assessment conducted, we have determined that you:

- Are fit for duty without restrictions
- Are fit for duty with the following restrictions: [Specify Restrictions]
- Are not fit for duty at this time and require further evaluation.

If you are fit for duty, you are cleared to resume your regular activities as of [Resumption Date]. If further evaluation is required, please contact [Contact Person] at [Contact Information] to discuss the next steps.

Thank you for your attention to this important matter. If you have any questions or need further clarification, feel free to reach out.

Sincerely,

[Your Name] [Your Title] [Company Name] [Contact Information]