

# Temporary Job Assignment Confirmation

Date: [Insert Date]

[Employee's Name] [Employee's Address] [City, State, Zip Code]

Dear [Employee's Name],

We are pleased to confirm your temporary job assignment with [Company Name]. You will be working as a [Job Title] from [Start Date] to [End Date]. Your primary responsibilities will include [Brief Description of Responsibilities].

Your work schedule will be [Insert Work Schedule] and you will report to [Supervisor's Name]. Your hourly rate will be [Insert Rate] and all standard company policies and procedures will apply during your assignment.

Please sign and return a copy of this letter to indicate your acceptance of this temporary assignment.

Thank you, and we look forward to your contributions during this period.

Sincerely,

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

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Signature: [Employee's Name]