

Notification of Temporary Work Eligibility

Date: [Insert Date]

To: [Recipient's Name]

Address: [Recipient's Address]

Dear [Recipient's Name],

We are pleased to inform you that you are eligible for temporary work under the following conditions:

- **Position:** [Job Title]
- **Department:** [Department Name]
- **Eligibility Period:** [Start Date] to [End Date]
- **Working Hours:** [Working Hours]

Please ensure you fulfill any required documentation and comply with the outlined conditions for your eligibility. If you have any questions or require further information, do not hesitate to contact us.

Best regards,

[Your Name]

[Your Position]

[Your Company]

[Your Contact Information]