

# Employment Terms Revision

Date: [Insert Date]

[Employee Name]

[Employee Address]

[City, State, Zip Code]

Dear [Employee Name],

We are writing to inform you about the proposed revisions to your employment terms effective [Effective Date].

The revised terms are as follows:

- **Position:** [New Position]
- **Salary:** [New Salary]
- **Benefits:** [Revised Benefits]
- **Work Hours:** [Revised Work Hours]

Please review the changes and sign below to acknowledge your acceptance of the revised terms.

We value your contributions and are looking forward to your continued success with [Company Name].

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Company Address]

[City, State, Zip Code]

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Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_