

Telework Eligibility Verification

Date: [Insert Date]

To Whom It May Concern,

This letter serves to verify the telework eligibility of the following employee:

Employee Name: [Employee Name]

Employee ID: [Employee ID]

Department: [Department]

Position: [Position]

After a thorough review of the employee's role and performance, we confirm that [Employee Name] is eligible for telework privileges due to [reason for eligibility, e.g., nature of work, performance metrics, etc.].

Should you require further information or clarification, please do not hesitate to contact us at [Contact Information].

Sincerely,

[Your Name]

[Your Position]

[Company Name]

[Contact Information]