Appendix G: Example Return to Duty Notice

Dear [Employee Name]:

1. Background. This letter is to warn you that your continued excessive absences will no longer be tolerated. Over the past several years, you have demonstrated unreliable attendance and excess use of leave (a total of \_\_\_\_\_\_ hours (20XX) and \_\_\_\_\_\_ hours (20XX)). During 20XX, your leave record indicates that you used \_\_\_\_\_\_ hours of sick leave, \_\_\_\_\_\_ hours of annual leave, and \_\_\_\_\_\_\_ hours of leave without pay (LWOP) during 20XX (excluding the XXX hours of Family and Medical Leave Act of 1993 (FMLA) granted between [date] and [date]). This continuing pattern of excessive absences is having an adverse impact on mission accomplishment and is placing your continued employment with the Army in jeopardy.

2. [Detailed procedural history].

3. Employee Programs. On (date), your supervisor notified you of the numerous programs that are available to help you through a period of serious illness or to help you to perform the essential duties of your position and maintain your employment. These programs include:

a. Family Medical Leave Act (FMLA)—You invoked your entitlement for the FMLA for the twelve-month period from [date] to [date]. It is my understanding that you have used XXX hours of FMLA leave and that your FMLA leave entitlement for this year is exhausted.

b. Voluntary Leave Donation Program—It is my understanding that you are currently enrolled.

c. Reasonable accommodation—On [date], you were notified of your right to request a reasonable accommodation if you feel that you are a qualified employee and that there is a reasonable accommodation that would allow you to perform the essential duties of your position. A reasonable accommodation is a change in your work environment or in the way things are customarily done that would allow you to perform the essential duties of your position. [History—Requested/Approved/Denied].

4. Conclusion. The [agency] has demonstrated considerable patience in allowing you to resolve your various medical conditions. Despite these efforts, you have continued to have excessive absences in 20XX. This problem is compounded by the fact that these absences are unscheduled with no foreseeable end, making it virtually impossible for your supervisor to assign tasks to you or to have any confidence that you will be able to performed assigned tasks in a timely fashion. The [agency] requires that your position as a [specify position of record with specified organization] be filled by an employee who is available for duty on a regular full-time [part-time] basis. Your pattern of excessive absences has continued well beyond a reasonable time. Therefore, you are hereby notified that adverse action (up to including removal) may be taken unless you demonstrate regular attendance and are available for duty on a regular, full-time [part-time] basis in the future.

5. If you have questions regarding this memorandum, please feel free to contact me at (XXX) XXX-XXXX and [email].

Respectfully,

[Supervisor's Signature Block]

Receipt Acknowledged:

Employee Signature

Date