# SAMPLE LETTER OF RECALL

# (Layoff Unit and Class from Which Laid off)

**New: 7/17**

Date of Notice

Employee Name

Name of Agency/Institution

Person

Dear (*first name of employee*):

This letter is to inform you that your name has been referred from the recall list for the class of \_\_\_\_\_\_\_\_. You are advised to report to (location) at (date and time). It is important that you understand this offer of employment is contingent upon the ability to perform the essential functions of the position to which recalled.

Failure to accept the offered position, if you can perform the assigned functions of the position, within five days of receipt of this letter will negate any further right to recall.

If you have any questions, or need further information, please contact me.

Sincerely,

(*Appointing Authority*)

cc: Personnel File

HRA contact Supervisor

# Complete and return this form to:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please Check One:**

**\_\_\_\_\_ I will report to work on the date noted above.**

**\_\_\_\_\_ I do not accept this position.**

*Employee's Signature Date*