



## Return to work form

This form should be completed by the Manager in the presence of the employee on return from a period of absence /sick leave no longer than 48 hours after return to work.



Was the correct absence reporting procedure followed?

Yes/No

If correct reporting procedure not followed why not.

**Further action required**

Phased return \_\_\_\_\_  
\_\_\_\_\_

Light duties \_\_\_\_\_  
\_\_\_\_\_

Refer for formal action \_\_\_\_\_  
\_\_\_\_\_

Signed employee \_\_\_\_\_ Date \_\_\_\_\_

Signed manager \_\_\_\_\_ Date \_\_\_\_\_

