## **Phased Return-to-Work Plan Template**

## **Employee Information**

Employee Name				
Job Title				
Department				
Manager/Su	ipervisor			
Date of Pha	sed Return Start			
Phased Return Plan Overview				
Summary of Adjustments				
Goals during Phased Return				
Weekly Schedule				
Week	Dates	Planned	Tasks/Responsibilities	Comments/Adjustments
TTOOK	Dutes	Hours/Days	rasks/responsibilities	Oominents/Agastrients

## **Support and Adjustments Details of Support Provided** Workplace Adjustments **Review and Monitoring** Review Date(s) Notes from Review(s) **Signatures** Employee Date Manager/Supervisor

Date