**Recall Letter**

The purpose of this document is to provide you with guidelines and a sample letter to provide to your employee if a recall is required.

Any business documentation should always be carefully reviewed and should take into consideration the provincially applicable Employment Standards Act and Human Rights’ legislation. We recommend that businesses review any sensitive issues with a qualified/certified professional (i.e. employment lawyer) should they want the document to be legally binding.

***Recommendations for using CFIB templates:***

|  |
| --- |
| 1. Check with your Employment Standard Office or Business counsellor to confirm considerations that may apply to a recall in accordance with the Employment Standards Act and Human Rights Act. 2. Send a registered Recall letter to your employee. 3. Ensure that you and the employee have a copy of the letter. This will be to clarify any misunderstanding or could provide you with an advantage in legal proceedings. 4. Should the employee not agree to the letter or show litigious signs, consult your lawyer before proceeding. |

***How to read & customize this template:***

* Words in grey must be replaced by information specific to your business and or province.
* We have also included some optional tips; they are to be deleted before printing this document.

**Important Notes:**

* As a member of CFIB, your membership gives you access to our business support services. Our Counsellors can assist members when customizing these documents, but it is always recommended that the final draft be reviewed with a qualified/certified professional (i.e. employment lawyer).
* If you are a federally regulated business, this letter will have to be adjusted to be in line with the Canada Labour Code. Please discuss those specific needs directly with a CFIB Counsellor.

**Need customized advice? Contact us!**

**1 888 234-2232 |** [**cfib@cfib.ca**](mailto:cfib@cfib.ca)

***This guide is provided to you for information purposes only. CFIB cannot be held responsible for its final content or for any subsequent use and interpretation thereof by the company or a third party.***

*We suggest that you remove this introductory page when preparing your company’s letter.*

By email or registered mail

Date

Name

Address

Email address

Dear Employee Name;

Re: Recall to Work from Temporary Layoff

The purpose of this letter is to advise you that we have been approved for wage subsidy/able to reopen/restart operations and are in a position to recall employees back to work. You were temporarily laid off from your position on date with the possibility of a recall to return to work within xx days.

We are pleased to notify you that your position is again available effective date and this letter is an official notice of recall for you to return to work in your full time/part time position of job title. You are expected to be at work on date. Your regular pay and hours of work will remain unchanged as per your employment agreement prior to the temporary layoff date. As per the temporary layoff letter you received on date, you are expected to notify name/contact information of your intent to return to work as scheduled by xx business days. If you have concerns about your ability to return to work, please notify name at number to discuss your concerns within xx business days of your Recall notice.

**Pay**

Upon your return to work, you will receive your first pay on date for regular wages up to and including date. You will receive all earnings owing ex/including any outstanding payments i.e. bonus/commissions etc. as itemized below.

|  |  |
| --- | --- |
| Regular Wages: | $ |
| Bonus/Commissions: (if applicable) | $ |
| Vacation Pay: (if applicable) | $ |
| Total: | $ |

**Vacation time**

You have been paid your accrued vacation to [date] as per your request at the time of your temporary layoff. Your eligibility for paid vacation (prorated) is # of days for the remainder of this year. (If applicable) Business name may introduce a blackout period for vacation requests upon return to work if business operations require it.

**Group Benefits** (delete this section if no group benefits are available to employees)

Your participation in any group benefits plan will continue without interruption as long as you remain employed with company name.

**Government Income Support**

If you are receiving benefits from the government, it is your responsibility to report to the appropriate government office that you have returned to work.

Name, we look forward to working with you again and if you have any questions regarding this letter or any other concerns, please contact name at email/phone.

Best regards,

Name, Title

Business Name