

Temporary Layoff Due to Coronavirus

Date:

To: [Employee Name]

From: [Company Representative Name, Title]

Re: Temporary Layoff

The Coronavirus (COVID-19) pandemic has affected families, communities, and businesses worldwide. The outbreak has also impacted our economy, with both the federal government and local governments enforcing mandates to help prevent the spread of the virus. We understand and support these decisions to keep individuals safe, and also recognize the major impact this has had on our day-to-day business operations.

Due to current business conditions, [Company Name] will be experiencing a temporary layoff effective [date, effective immediately]; your position is impacted by this layoff. We feel that it is necessary to conduct this layoff to bring the company through this slow time. We are asking for everyone's help and understanding in getting through this difficult period. At this time, we don't know how long the layoff will continue; our hope is that it is short-term.

The following information pertains to your compensation and benefits during the temporary layoff:

- You will continue in our medical/dental insurance plan and will be responsible for paying your portion of the premiums. Information on how those payments are to be made is included with this letter. **OR** Based on the contract with our insurance provider, your medical/dental insurance will end [insert date]. You will receive separate information regarding your ability to continue benefits through the group health plan in compliance with COBRA regulations.
- You [have the option of **OR** will be required to] use your paid time off benefits before going into unpaid status.
- You are encouraged to file for unemployment compensation benefits through the state. Unemployment benefits are available to individuals who are unemployed through no fault of their own. If an employer must shut down operations and no work is available, individuals may be eligible for unemployment benefits if they meet the monetary criteria and the weekly eligibility criteria established by the state.

While you are on layoff, it is very important that your supervisor has your correct contact information. Employees will be recalled from layoff based on [production requirements, knowledge, skills and abilities--*this may vary based on circumstances]. If we cannot reach you within [xxx] days (first, a phone call, then an email, and then, if no response, a registered letter), it may result in the termination of your employment from [Company Name].

While you are on layoff, any questions should be directed to [NAME, title] by email at [insert here] or phone at [insert here]. Please know [Company Name] is hopeful that employees will be able to return to work as soon as possible. [Company Name] continues to monitor the situation closely and will continue to communicate to employees and business contacts in the coming weeks and months.

Sincerely,

[Name]

[Title]

Enclosure [insert Employee Assistance Program information, COBRA and/or payment of premiums]

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