

# ***Modified Duty Assignment***

## **Employee's Name**

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The above named Employee is to be assigned light and/or limited duty. The work restrictions listed below are the maximum duty limits and are not to be exceeded by any assignment even if the Employee expresses a willingness to voluntarily exceed these limits.

| <b>Modified Duty Limitations</b> | <b>Associated Limitations</b> |
|----------------------------------|-------------------------------|
|----------------------------------|-------------------------------|

|  |  |
|--|--|
| <input type="checkbox"/> No prolonged standing |  |
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|   |  |
|---|--|
| <input type="checkbox"/> No prolonged walking |  |
|---|--|

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|   |  |
|---|--|
| <input type="checkbox"/> No prolonged sitting |  |
|---|--|

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|   |  |
|---|--|
| <input type="checkbox"/> No knee bending, squatting, kneeling |  |
|---|--|

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|   |  |
|---|--|
| <input type="checkbox"/> Limited or no use of |  |
|---|--|

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|--|--|
| <input type="checkbox"/> Weight lifting restrictions |  |
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|  |  |
|--|--|
| <input type="checkbox"/> Keep affected area elevated |  |
|--|--|

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|  |  |
|--|--|
| <input type="checkbox"/> Keep dressing dry and clean |  |
|--|--|

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Use crutches/sling/splint

\_\_\_\_\_

Other

\_\_\_\_\_

The Employee has been assigned to the Alternative Duty Program and will not be available to her/his normal department.

**{INSERT JOB TITLE}:**

**Date:**

\_\_\_\_\_

**EMPLOYEE & SUPERVISOR & MANAGEMENT  
ENDORSEMENT**

I have been offered a modified duty assignment, as listed below which complies with work restrictions prescribed by my Doctor.

**Modified**

**Assignment:** \_\_\_\_\_

\_\_\_\_\_



I accept this assignment.



I refuse to

accept this assignment and will not perform this job, therefore I resign my employment effective immediately.

**Employee's Signature**

**Date**

\_\_\_\_\_

**Reader or Interpreter's Signature**

\_\_\_\_\_

**Supervisor's Signature**

**Date**

\_\_\_\_\_

**Manager's Signature**

\_\_\_\_\_ **Date**  
\_\_\_\_\_

**{INSERT JOB TITLE}:**

\_\_\_\_\_ **Approval of**  
**Modified Assignment**