

Return To Work Interview Form



<p>Was the employee's loss to the department discussed? YES / NO</p> <p>If yes, provide details of comments made</p>	
<p>Is it recommended that the employee is referred to the Company's Health Adviser? YES / NO</p> <p>If yes, for what reasons?</p>	
<p>Is the employee to receive a caution in relation to this absenteeism? YES / NO</p> <p>If yes, provide details</p>	
<p>Employee's signature:</p> <p>Print Name:</p> <p>Date:</p>	<p>Interviewers signature:</p> <p>Print Name:</p> <p>Date:</p>