

[Print on Employer's Company Name and Address]

<<Employee's Name>>  
<<Address>>  
<<Address>>  
<<Post Code>>

<<Date>>

Dear << >>

**Stage 2 sickness absence management**

Following the Stage 2 short-term/frequent sickness absence formal review meeting on <<Date>>, I am writing to confirm

As you know, the meeting arrangements continued unsatisfactory attendance level in the <<state>> following the Stage 1 sickness absence meeting on <<insert date>>

At the meeting, we discussed <<summarise conversation, including any agreed targets and steps taken to support the employee's attendance levels in the respects in which the employee's attendance levels have improved since the meeting level>>.

The Company treats personal sickness absence management procedure in accordance with the Company's sickness absence management procedure.

[At the meeting, we discussed arrangements which could be made to support you to achieve your role to support you to achieve agreed changes e.g. reduce working hours and we agreed: <<insert details of agreed changes e.g. reduce working hours>>. These changes are [permanent or temporary] to apply from <<insert date>> [to <<insert date>>]. Please sign this letter to indicate your agreement to these arrangements.]

In view of our discussions and arrangements, you are being given a short-term/frequent sickness absence management warning that you have failed to reach an acceptable level of attendance given a Stage 2 formal warning. I also warned you that you must improve or you will face further action under the policy. You are given a warning that, if you reach absence levels of <<state>> in a <<state>> sickness absence management period, this will trigger Stage 3 of the procedure.

You have the right to appeal a decision. If you wish to appeal, you should write to <<state name and job title>> <<insert number>> days, setting out the reasons for your appeal.

Yours sincerely

S  
A  
M  
P  
L  
E

<<Name & Title>>

For and on behalf of <<Company>>

S

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