Highlighted text is to be completed with relevant information.

**Green** text are optional clauses. Convert to match black font or delete clause if not applicable.

**Red** text are guidance notes and need to be deleted along with this text box.

Y

Date

Employee name

Address line 1

Address line 2

STATE Postcode

**BY HAND/ EMAIL: email address if applicable**

Dear Employee Name,

**Temporary change to the terms and conditions of your employment**

Further to recent discussions, I write to confirm that we have agreed to the following temporary changes to your terms and conditions due to the impact of the coronavirus on the business:

* You have agreed to temporarily vary your hours of employment (together with a pro rata reduction in pay) as follows [insert details]
* You have agreed to temporarily reduce your salary or wages from [insert] to [insert]
* You have agreed to take a period of unpaid leave commencing [date] until [further notice]

The amendments will be effective from insert date and will operate until further notice.

I will inform you as soon as I have more information about how long these temporary arrangements will be in place.

To confirm that you accept these temporary changes to your terms and conditions please sign and return the form below and return it to me. Please also keep one copy of this letter for your records.

Please contact me if you have any questions.

Yours sincerely,

Signatory Name

Signatory Title

**Employer Name**

I have read and understood the contents of this letter and agree to the temporary change in my terms and conditions of employment as set out above.

Full name (please print):

Signature:

Date: