

ADAMIK ELECTRIC

TEMPORARY LIGHT DUTY OFFER

NAME: _____

CLAIM #: _____

EMPLOYER: _____

LIMITATIONS: _____

LIGHT DUTY ASSIGNMENT

TITLE: _____

DATE BEGINS: _____

LOCATION: _____

RATE OF PAY: _____

DURATION OF ASSIGNMENT: _____

ASSIGNMENT DESCRIPTION

() I accept this light duty assignment, have read and understand "Employee Responsibilities"

() I am unable to accept this light duty assignment because

Employee Signature

Date

Light Duty Supervisor Signature

Date