

## **RETURN TO WORK FORM (REINSTATEMENT)**

		DF	DATE SUBMITTED:	
I am returning to work effective			. I was on leave of absence without	
pav starting	. The reas	on for my leave is		
		·		
			Sign above Printed Name	
			 Unit/Department	
NOTED BY:				
Unit Head	AVP (for tertiary	HR Director	Payroll In-charge	
	Faculty only)			
XAVIER UNIVER HUMAN RESOUI				
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pay starting	The reaso	in for my icave is _	·	
		•		
			Sign above Printed Name	
			Unit/Department	
NOTED BY:			<i>,</i> ,	
Unit Head	AVP (for tertiary Faculty only)	HR Director	Payroll In-charge	

Copies: For Tertiary faculty: (5) Employee, Unit Head, Finance Office, AVP, HRO

For Others: (4) Employee, Unit Head, Finance Office, HRO