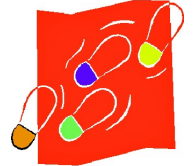




# St Mark's Church Preschool

St Mark's Church Community Centre, Calder Rise,  
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www.stmarkschurch.com office@stmarkschurch.com



*A step in the  
right direction*

## Fit for Work and Return to Work Note

**Name of member of staff**

**Manager conducting return to work interview**

**Please give details of your sickness**

**What date did your sickness begin**

**What date did your sickness end**

**Are you fully recovered ?**

**Did you see your GP**

**Do you have another appointment?**

**Are you receiving any treatment / medication ?**

**Does his affect you ?**

**Is there a possibility that the sickness will re-occur?**

**Is there something St Mark's can do to help with future absences**

**What date did you last work before your sickness began**

**At what time did you finish work on that date**

**Was your sickness caused by an accident at work or an industrial disease**



**Note any comments or concerns**

**Actions to be taken** (Counselling, disciplinary action, etc.)

**Please ensure**

1. Member of staff has been advised of their value to our team at St Mark's Church Preschool. They have been advised that all staff are monitored in accordance with our sickness policy.
2. Member of staff has been advised that all sickness is monitored and sick pay is paid in accordance with our sickness policy.

I confirm that the information I have given is correct

Signed by member of staff

Signed by manger

Date