

# Memorandum

To: **Employee's Name**

From: **Name**  
Division Director

Date:

Subject: Layoff Confirmation

It is with regret that I write to confirm your layoff from your position as **Job Class Title** effective **Date**. I want to again assure you that this action reflects no discredit on your service with this department and is being taken solely due to **(add reason for layoff)**.

You are reminded that you will be placed on layoff for the department, job class, location, and position status from which laid off. To change these conditions, you must complete a "Conditions of Employment Upon Return From Layoff" form which was previously provided to you. This form is also available on the HR Forms page at: <http://doa.alaska.gov/dop/resources/hrforms/>. You are also reminded that if you decline a position that meets these conditions, or if you fail to respond to a recall offer, you will lose your layoff rights.

Please do not hesitate to contact me at **XXX-XXXX**, or our Department Human Resources staff at **XXX-XXXX** with any questions you may have.

cc: **Name**, Human Resources Consultant  
DOA/DOPLR Recruitment Services  
DOA/DOPLR Payroll Services  
**Name**, Union