# Notice - Depletion of Paid Injury Leave and Begin of Injury Leave Without Pay

This letter is sent as a courtesy to employees who initially elect to use paid injury leave and before returning to work, exhaust accrued leave.

Dear [EMPLOYEE]:

# As you requested, you were granted paid injury leave for your work-related injury. Because your accrued leave [has been OR will be] exhausted, you will be placed on injury leave without pay effective [DATE].

Your workers’ compensation indemnity benefits are not affected by this change. You will no longer receive the paid injury leave supplement. If you have any questions, please contact me at [ADDRESS AND/OR TELEPHONE].

Sincerely,

WC Coordinator

cc: Supervisor

Note: This work-related injury does not indicate and should not be interpreted to indicate that you are regarded by the commonwealth as having a disability as defined by the ADA.