

[Your Company Letterhead]

[Date]

[Employee's Name]

[Employee's Address]

[City, State, Zip Code]

Dear [Employee's Name],

Subject: FFCRA Eligibility Notification

We are writing to inform you about your eligibility for paid leave under the Families First Coronavirus Response Act (FFCRA).

Based on the information you provided, you are eligible for the following types of leave:

1. ****Emergency Paid Sick Leave****: [Specify duration and reasons for eligibility]

2. ****Emergency Family and Medical Leave****: [Specify duration and reasons for eligibility]

Please note that this eligibility is based on your request dated [insert date of request] and the circumstances surrounding your situation.

Should you have any questions or require further assistance, please do not hesitate to reach out to [HR Contact Name] at [HR Contact

Phone/Email].

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Company Name]