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[Company/Organization Name]

Effective Date: [Date]

**Employee Temporary Layoff Policy**

**1. Purpose:**  
The purpose of this policy is to establish guidelines and procedures for temporary layoffs at [Company Name]. This policy outlines the conditions under which temporary layoffs may occur and the rights and benefits of employees during the layoff period.

**2. Definition of Temporary Layoff:**  
A temporary layoff refers to a period during which employees are placed on a temporary, unpaid leave of absence due to business-related reasons, such as a downturn in business, economic hardship, or other unforeseen circumstances. Temporary layoffs are intended to be short-term and are not to be considered as termination of employment.

**3. Eligibility for Temporary Layoff:**  
a. Temporary layoffs may be implemented for employees across all departments and positions based on business needs, economic conditions, or other factors that necessitate a reduction in workforce temporarily.  
b. The decision to implement temporary layoffs will be made by [Company Name] management and will be communicated to affected employees in advance.

**4. Notice and Communication:**  
a. Whenever possible, employees will receive a minimum notice period before the temporary layoff takes effect. The notice period will adhere to the local labor laws and regulations.  
b. The reasons for the temporary layoff, the expected duration, and any available resources or support during the layoff period will be communicated to affected employees.

**5. Duration of Temporary Layoff:**  
a. Temporary layoffs are intended to be short-term and may vary depending on business conditions. The expected duration of the layoff will be communicated to affected employees, subject to change based on business needs.  
b. [Company Name] will make efforts to recall employees from temporary layoff as soon as business conditions permit.

**6. Employee Benefits During Temporary Layoff:**  
a. During the temporary layoff period, employees will not receive regular wages or salary.  
b. Employees may be eligible to maintain certain benefits during the layoff period, such as health insurance, subject to the terms of the benefit plans and applicable laws. Employees will be responsible for any premium payments required during the layoff.  
c. Employees may also be eligible to use accrued paid time off (e.g., vacation, sick leave) during the layoff period, subject to approval and company policy.

**7. Recall and Reinstatement:**  
a. As business conditions improve, [Company Name] will make efforts to recall employees from temporary layoff based on seniority, skill set, and business needs.  
b. Employees who are recalled will be reinstated to their previous position or a substantially similar position with the same or similar terms and conditions of employment as before the layoff.

**8. Job Search and Training Opportunities:**  
a. During the temporary layoff period, employees are encouraged to explore job search opportunities and attend training or upskilling programs to enhance their employability.  
b. [Company Name] may provide resources or information to support employees in their job search or training efforts.

**9. Alternative Solutions:**  
[Company Name] will explore and consider alternative solutions, such as reduced work hours, job-sharing, or other flexible arrangements, before implementing temporary layoffs, whenever possible and feasible.

**10. Layoff Termination and Severance Pay:**  
If business conditions do not improve, and the temporary layoff becomes permanent or leads to employee terminations, [Company Name] will adhere to the applicable labor laws and provide employees with any required severance pay or notice period.

**11. Policy Review:**  
This employee temporary layoff policy will be periodically reviewed to ensure its effectiveness and alignment with changing business needs, labor laws, and industry best practices.

By implementing this temporary lay off policy, [Company Name] aims to address business challenges while maintaining open communication with employees and providing support during temporary layoff periods.

**Employee:**

I have read and understood the Employee Temporary Layoff Policy, and I do not have any questions.

[Employee's Full Name]

[Employee's Signature]

[Date]

**Company:**

[Company Name]

[Company Representative's Name]

[Company Representative's Title]

[Company Representative's Signature]

[Date]