DATE

Employee

Address

City/State/Zip Code

Dear Ms./Mr.\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

In accordance with the provisions of COMAR Title 17.04.11.17, you are being placed on paid administrative leave effective DATE until further notice OR – ACCORDING TO A SPECIFIC SCHEDULE. PLEASE DETAIL THAT TO THE EXTENT POSSIBLE IN THIS LETTER.

While on paid administrative leave, you must be available at your home address and telephone number during normal business hours should it be necessary for representatives of the Office of Human Resources or the UNIT NAME to contact you. The most recent contact information we have on file for you is: STREET ADDRESS; PHONE NUMBER, EMAIL ADDRESS. If this information is incorrect, please notify me immediately.

Should you have any questions concerning the above, you may contact me at PHONE.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, APPOINTING AUTHORITY

Office of Human Resources

c: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,Supervisor

 Official Personnel File