Highlighted text is to be completed with relevant information.

**Green** text are optional clauses. Convert to match black font or delete clause if not applicable.

**Red** text are guidance notes and need to be deleted along with this text box.

Date

Employee name

Address line 1

Address line 2

STATE Postcode

**BY HAND/ EMAIL: email address if applicable**

Dear Employee Name,

**Potential Redundancy**

I write to confirm that your position is at risk of redundancy. This situation has arisen due to give reasons for redundancy situation, e.g. downturn in business, operational changes, etc.

Before making any decisions regarding the potential redundancy we wish to hold a consultation meeting with you. At the meeting we wish to discuss:

* how the potential redundancy will affect you;
* any suggestions you may have to avoid the redundancy;
* any options for you to be redeployed in another role.

I have arranged a consultation meeting at insert location on insert date at insert time. The following persons will be attending the meeting: insert details.

You may bring a support person to the meeting if you wish. If you wish to do so, please let me know the name of your support person as soon as possible and prior to the scheduled meeting time.

Following the consultation meeting we intend to make a decision on whether your role will be made redundant. If your role is made redundant and there are no suitable redeployment opportunities available to you, you will be given notice that your employment will terminate on the grounds of redundancy.

Please contact me if you have any comments or questions.

Yours sincerely,

Signatory Name

Signatory Title

**Employer name**