



# FITNESS FOR DUTY

Employees who are absent due to illness or injury (either work-related or non-occupational) may be required to have their physician or other qualified health provider complete a Fitness for Duty Certification before returning to work. The completed form should be returned to Human Resources will make a determination as to his/her ability to return to work. No employee will be allowed to return to work without a satisfactory Fitness for Duty Certification on file.

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Is employee able to perform the functions of his/her position?  Yes  No

Any restrictions?  Yes  No If yes, please describe restriction(s) and duration below:

RETURN TO WORK:  With No Limitations Date: \_\_\_\_\_

**(Suzlon rotor Corp. has an active return-to-work program. Most temporary restrictions can be accommodated. Please call 507-562-6700 if you have any questions regarding light duty jobs.)**

\_\_\_\_\_ TOTALLY DISABLED: (Dates) From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_ RESTRICTED WORK: Duration of Limitations: \_\_\_\_\_ Days/Weeks

\_\_\_\_\_ Restricted Work Hours: May Work \_\_\_\_\_ hours per day \_\_\_\_\_ hours per week.

\_\_\_\_\_ Restricted Lifting: Maximum lift: \_\_\_\_\_ 10lbs \_\_\_\_\_ 20lbs \_\_\_\_\_ 30lbs \_\_\_\_\_ 40lbs \_\_\_\_\_ 50lbs  
Weight limit for repetitive lifting or carrying: (more frequent than 2 times per hour)  
\_\_\_\_\_ 0-5lbs \_\_\_\_\_ 5-10lbs \_\_\_\_\_ 10-20lbs \_\_\_\_\_ 20-30lbs \_\_\_\_\_ 30-40

\_\_\_\_\_ Restricted bending: (Limit in degrees) \_\_\_\_\_ Bending frequency (# of times per hour): \_\_\_\_\_

\_\_\_\_\_ Restricted use of hand:  Right  Left  No Use or  Limited repetitive grasping, gripping

\_\_\_\_\_ Standing/Sitting: Standing (hours per day) \_\_\_\_\_ Sitting (hours per day) \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_

Next Appt. Date / Time: \_\_\_\_\_ Provider's Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employee Signature: \_\_\_\_\_

Physician or Practitioner Signature: \_\_\_\_\_

Type of Practice: (Field of Specialization) \_\_\_\_\_