

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient Name]
[Company Name]
[Company Address]
[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally address my rights under the Family and Medical Leave Act (FMLA) as they pertain to my current situation.

As an eligible employee, I understand that I have the right to take up to [number of weeks] of unpaid leave for specific family or medical reasons.

I would like to discuss the procedures for applying for this leave and ensure that my rights are fully protected during this process.

Please provide me with the necessary documentation and guidelines to formally request FMLA leave. I appreciate your attention to this matter and look forward to your prompt response.

Thank you.

Sincerely,

[Your Name]

[Your Position, if applicable]