

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Recipient's Organization]
[Organization's Address]
[City, State, ZIP Code]

Dear [Recipient's Name],

I am writing to formally request justification for [specific request, e.g., medical leave, accommodation, etc.] due to medical reasons.

I have been diagnosed with [briefly explain medical condition] by [Doctor's Name] on [Date]. This condition requires [briefly describe what is needed, e.g., treatment, time off to recover, reasonable accommodations, etc.].

It is my doctor's recommendation that I [state specific requests or needs, e.g., take a leave of absence for a certain period, work from home, etc.], in order to effectively manage my health while maintaining my responsibilities. Attached to this letter, you will find [mention any attached documents, such as a doctor's note or medical records].

I appreciate your understanding and support regarding this matter. Please let me know if you require any further information or documentation.

Thank you for your attention to this important matter.

Sincerely,

[Your Name]
[Your Job Title, if applicable]
[Your Organization, if applicable]