

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

[Recipient's Name]
[Recipient's Title]
[Company's Name]
[Company's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request medical leave from work due to [briefly explain the reason, e.g., a serious health condition]. I would like to request the leave starting from [start date] and anticipate returning on [return date].

I have attached the necessary documentation from my healthcare provider to support my request. I will ensure that all my current responsibilities are managed during my absence and have made arrangements with

[Colleague's Name] to cover my duties.

Please let me know if you require further information or documentation.

Thank you for considering my request.

Sincerely,

[Your Name]

[Your Job Title]