

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

[Recipient's Name]
[Recipient's Title]
[Institution/Organization Name]
[Institution Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Application for Professional Student Leave

I hope this message finds you well. I am writing to formally request a leave of absence from my studies in the [specific program/course name] for the period of [start date] to [end date].

The reason for my request is [briefly explain the reason, e.g., professional development, medical reasons, family matters, etc.]. I believe that during this time, I will be able to [mention any benefits that may result from the leave].

I have ensured that all my responsibilities have been properly managed, and I am committed to keeping up with any missed work during my absence. I kindly ask for your understanding and support during this time.

Thank you for considering my request. I look forward to your positive response.

Sincerely,

[Your Signature (if submitting a hard copy)]
[Your Printed Name]
[Your Student ID (if applicable)]