[Your Company Letterhead] [Date] [Employee's Name] [Employee's Address] [City, State, Zip Code] Subject: Undertaking for Leave of Absence Dear [Employee's Name], This letter serves as an official undertaking concerning your request for a leave of absence. By signing this document, you acknowledge and agree to the following terms: 1. **Leave Duration**: You will be on leave from [start date] to [end date]. 2. **Reason for Leave**: [Specify reason for leave, e.g., medical, personal, etc.]. 3. **Return to Work**: You are expected to return to work on [return date]. 4. **Communication**: You will remain reachable at [your contact information] during your leave for any urgent matters pertaining to your responsibilities. 5. **Job Security**: Your position will be held for you during your absence, and you will be reinstated upon your return. Please sign below to confirm your understanding and acceptance of these terms. [Employee's Signature] [Date] [Authorized Signatory's Name] [Title] [Date] Thank you for your attention to this matter. Sincerely, [Your Name] [Your Position] [Company Name] [Company Contact Information]