

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]
[Supervisor's Name]
[Company Name]
[Company Address]
[City, State, ZIP Code]

Dear [Supervisor's Name],

I am writing to formally request an urgent medical leave of absence from work due to [brief reason for medical leave, e.g., illness, surgery, etc.]. I anticipate needing time off beginning [start date] and expect to return on [return date].

I understand the importance of my responsibilities and will ensure a smooth transition for my duties during my absence. I am willing to assist in any way possible to minimize disruptions.

Please let me know if you require any additional information or documentation regarding my situation. Thank you for your understanding.

Sincerely,

[Your Name]
[Your Job Title]
[Department]