

# Leave Confirmation Due to Health Issues

Date: [Insert Date]

To,

[Manager's Name]

[Company's Name]

[Company's Address]

Dear [Manager's Name],

I am writing to confirm my leave of absence from work due to health issues, which has been approved from [start date] to [end date]. I appreciate your understanding and support during this time.

During my absence, I will ensure that my responsibilities are managed and that my work is up to date before my leave starts. Please let me know if there are any urgent matters that require my attention before my leave begins.

Thank you for your consideration.

Sincerely,

[Your Name]

[Your Position]

[Your Contact Information]