Short-Term Illness Leave Acceptance

Date: [Insert Date]

To,

[Employee's Name]

[Employee's Address]

Dear [Employee's Name],

We are in receipt of your request for short-term illness leave dated [Insert Request Date]. We understand the importance of taking time off to recover and appreciate your communication regarding this matter.

We hereby accept your leave request, effective from [Start Date] to [End Date]. Please ensure that you keep us updated on your recovery progress and notify us of any changes to your return date.

Wishing you a speedy recovery.

Best regards,

[Your Name]

[Your Position]

[Company Name]

[Contact Information]