

Extended Medical Leave Request

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Manager's Name]

[Company's Name]

[Company's Address]

[City, State, Zip Code]

Dear [Manager's Name],

I am writing to formally request an extended medical leave of absence from work due to [brief explanation of medical condition]. After consulting with my healthcare provider, it has been advised that I take time off to focus on my recovery.

I propose to begin my leave on [start date] and anticipate returning to work on [return date]. I will ensure that my responsibilities are managed during my absence by [brief explanation of how you will handle your duties].

Please let me know if you need any medical documentation to support my request. I appreciate your understanding and support during this time.

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

Sincerely,

[Your Name]