

Parental Medical Leave Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Employer's Name]

[Company's Name]

[Company's Address]

[City, State, Zip Code]

Dear [Employer's Name],

I am writing to formally request parental medical leave from [start date] to [end date] due to [brief explanation of the reason, e.g., my child's medical condition]. During this time, I will ensure that my responsibilities are managed in my absence.

I appreciate your understanding and support in this matter. Please let me know if you require any additional documentation or if we need to discuss this further.

Thank you for your attention to this request. I look forward to your prompt response.

Sincerely,

[Your Name]