

Request for Family Medical Leave Forms

Date: [Insert Date]

To: [Insert Recipient's Name]

From: [Insert Your Name]

Subject: Solicitation for Family Medical Leave Forms

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request the necessary forms to apply for Family Medical Leave under the Family and Medical Leave Act (FMLA). Due to [briefly explain reason, e.g., a medical condition affecting my family member], I need to take time off from work to provide the necessary care.

Could you please provide me with the required documentation at your earliest convenience? This will help ensure that I can proceed with the application process without delay.

Thank you for your attention to this matter. I appreciate your support and understanding.

Sincerely,

[Insert Your Name]

[Insert Your Job Title]

[Insert Your Contact Information]