

Compassionate 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 compassionate leave from work for [number of days] days, starting from [start date] to [end date], due to [brief description of the situation, e.g., a family member's illness or passing].

I understand the importance of my responsibilities at [Company's Name] and assure you that I will do my best to ensure a smooth transition of my duties during my absence. I am willing to assist in any arrangements necessary and will ensure that all of my tasks are up to date prior to my leave.

Please let me know if you require any additional documentation or information regarding my request to facilitate your decision.

Thank you for your understanding and support during this difficult time.

Sincerely,

[Your Name]