

Medical Leave Justification Letter

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]

Subject: Medical Leave Request for Rehabilitation

Dear [Employer's Name],

I am writing to formally request a medical leave of absence from work for rehabilitation purposes. Due to [briefly explain your medical condition], I have been advised by my healthcare provider to participate in a rehabilitation program that requires my full attention and commitment.

The estimated duration of my rehabilitation program is [insert duration, e.g., weeks/months], commencing on [start date] and expected to conclude on [end date]. I understand the importance of my responsibilities at [Company's Name] and assure you that I will do everything possible to ensure a smooth transition of my duties during my absence.

I have attached the necessary medical documentation for your review. I am committed to maintaining open communication throughout this process and will provide updates as needed.

Thank you for your understanding and support during this time. I look forward to your favorable response.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]