## **Medical Leave Application**

Date: [Insert Date]

To,

[Manager's Name]

[Company's Name]

[Company's Address]

Subject: Application for Medical Leave

Dear [Manager's Name],

I am writing to formally request a medical leave of absence for [number of days] days, starting from [start date] to [end date]. Due to [brief explanation of the medical condition], I am unable to perform my duties effectively during this time.

I have attached a medical certificate from my physician for your reference.

I will ensure that all my responsibilities are taken care of before my leave and will remain accessible via [email/phone] for any urgent matters.

Thank you for considering my request. I hope to recover soon and return to work at the earliest.

Yours sincerely,

[Your Name]

[Your Position]

[Your Contact Information]