

Application for Medical Leave

To,

The Dean,
[University Name]
[University Address]

Date: [DD/MM/YYYY]

Respected Sir/Madam,

I am [Your Name], a student of [Your Course/Department] with roll number [Your Roll Number]. I am writing to formally request a medical leave of absence due to [briefly explain medical condition, e.g., a serious health issue].

As advised by my doctor, I need to undergo treatment and rest for [number of days/weeks]. Therefore, I would like to request leave starting from [Start Date] to [End Date]. I have attached the medical certificate for your reference.

I assure you that I will make every effort to keep up with the coursework and assignments during my absence. I appreciate your understanding and support during this time.

Thank you for considering my request. I look forward to your positive response.

Sincerely,
[Your Name]
[Your Contact Information]
[Your Roll Number]