

# Letter of Absence Request

**Your Name**

Your Address

City, State, ZIP Code

Email Address

Phone Number

Date: [Insert Date]

**Recipient's Name**

University Name

Department/Office (if applicable)

University Address

City, State, ZIP Code

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request a leave of absence from my studies due to health issues that have prevented me from attending classes.

Due to these health concerns, I have been advised by my doctor to take the necessary time to recover fully. I anticipate that I will need to be absent from [start date] to [end date]. I assure you that I am committed to keeping up with my coursework during this period and will coordinate with my professors to ensure I remain on track.

Attached to this letter is a medical certificate, which provides further details regarding my condition. 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]

[Student ID]