

Medical Leave Letter Sample

Dear [Mr/Ms./Mrs. Last Name]:

Due to medical reasons, I must formally request a medical leave for 30 days. I plan to leave work on [Date Leaving] and return to work on [Date Returning].

During my absence, I will undergo major, non-elective surgery. This surgery will render me temporarily unable to perform the essential functions of my position. I will use a small portion of this leave time to organize important household business and prepare my family. The rest will be devoted to healing, resting, and fully recovering. If I am granted this time, I will be able to resume my duties here and home at full capacity.

In my absence, my work will be reassigned to my coworkers, I will provided them with files, information, and assistance as required. However, if there are questions or concerns regarding my work, I may be able to answer them by phone or e-mail. Please do not hesitate to contact me during this time.

I understand that while I am gone, I am responsible for making payments towards my employee benefits. I will return to work promptly and as scheduled.

Thank you for your consideration,

Sincerely,

[Signature]

[Your Name]