[Your Name]
[Your Job Title]
[Your Employee ID Number]

[Date]

[Manager's Name]
[Company Name]
[Department]

Dear [Manager's Name],

I am writing to formally request a medical leave of absence starting on [Start Date] due to a personal medical condition. I expect to return to work on [Expected Return Date].

I have attached the necessary medical certification from my healthcare provider to support this request. I intend to fulfill my job responsibilities as effectively as possible until my leave begins and will assist in the transition of my current projects to [Colleague's Name or Department].

During my absence, I can be reached at [Your Email Address] or [Your Phone Number] for urgent matters regarding my transition, though I would appreciate privacy regarding my medical status.

Thank you for your understanding and support regarding this matter.

Sincerely,

[Your Signature]

[Your Printed Name]