

[Your Name]  
[Your Address]  
[Your Phone Number]  
[Your Email]

[Date]

[Manager's Name or HR Department]  
[Company Name]  
[Company Address]

Subject: Request for Medical Leave of Absence

Dear [Recipient Name],

Please accept this letter as formal notification that I need to take a medical leave of absence for mental health reasons. Based on the recommendation of my healthcare provider, I will be unable to work starting [Start Date].

I anticipate being able to return to my duties on [Expected Return Date]. I will keep you updated should there be any changes to this timeline based on my medical evaluation.

Attached to this letter, please find the formal certification from my physician confirming my need for this leave. This documentation outlines the medical necessity of my absence while maintaining my right to diagnostic privacy.

During my absence, I have prepared [Name of Colleague] to handle my current projects to ensure a smooth transition. Please let me know what additional forms or steps are required by [Company Name] to process this request.

Thank you for your understanding and support regarding this matter.

Sincerely,

[Your Signature]

[Your Printed Name]