

[Your Name]  
[Your Job Title]  
[Date]

To: [Manager's Name or HR Department]  
[Company Name]

**Subject: Confidential Request for Medical Leave of Absence**

Dear [Recipient Name],

I am writing to formally request a medical leave of absence for a scheduled surgery and the subsequent recovery period. For privacy reasons, I prefer to keep the specific details of the procedure confidential.

My last day of work will be [Start Date of Leave]. Based on my surgeon's current estimates, I expect to be able to return to my duties on [Expected Return Date]. I will keep you updated should my recovery timeline change based on medical advice.

Before my departure, I will ensure that all my current projects are up to date and provide a transition plan for my responsibilities to [Colleague's Name or Team].

I have attached the necessary medical certification from my healthcare provider confirming the need for this leave and the expected duration. Please let me know what additional forms or steps are required to finalize this request.

Thank you for your understanding and for respecting my privacy regarding this matter.

Sincerely,

[Your Signature]  
[Your Printed Name]