

[Date]

[Employee Name]

[Employee ID]

[Department]

Subject: Conditional Approval of Unpaid Leave of Absence

Dear [Employee Name],

We have received your request for an unpaid leave of absence from [Start Date] to [End Date]. We are pleased to inform you that your request is conditionally approved, subject to the following requirements:

- **Handover of Duties:** You must complete all pending tasks and provide a written handover report to [Manager Name] by [Date].
- **Documentation:** You must provide [List specific documents, e.g., medical certificate or legal papers] no later than [Date].
- **Project Completion:** The approval is contingent upon the successful delivery of [Project Name] by [Date].

Please note that during this period, your leave will be unpaid. Your benefits will be handled as follows: [Insert details regarding insurance/benefits].

Failure to meet these conditions by [Deadline Date] may result in the withdrawal of this approval. Please sign and return a copy of this letter to acknowledge your agreement to these terms.

We wish you the best during your time away.

Sincerely,

[Your Name]

[Your Title]

[Company Name]

Employee Acknowledgment:

I accept the conditions stated above.

Signature: _____ Date: _____