

[Date]

[Employee Name]

[Employee ID]

[Department]

**Subject: Conditional Approval of Bereavement Leave**

Dear [Employee Name],

We were sorry to hear about your loss and would like to extend our deepest condolences to you and your family.

This letter is to formally acknowledge your request for bereavement leave from [Start Date] to [End Date]. We have granted conditional approval for this leave period.

Please note that this approval is subject to the following condition(s):

- Submission of supporting documentation (such as an obituary, funeral program, or death certificate) by [Due Date].
- Completion of a formal leave request form through the [HR Portal/Department Office].
- [Additional Condition, if applicable]

According to company policy, [Number] days of this leave will be [Paid/Unpaid]. If you require additional time beyond the dates listed above, please contact your supervisor as soon as possible to discuss further arrangements or the use of accrued vacation time.

Upon your return to work on [Return Date], please check in with [Manager Name/HR Representative] to finalize your leave records.

Our thoughts are with you during this difficult time.

Sincerely,

[Your Name]

[Your Title]

[Company Name]