

[Company Name]  
[Address]  
[City, State, Zip Code]

[Date]

[Employee Name]  
[Employee ID]  
[Department]

**Subject: Conditional Approval of Military Leave of Absence**

Dear [Employee Name],

We have received your request for a military leave of absence starting on [Start Date] and ending on approximately [End Date].

Your request is **conditionally approved** pending the submission of the following required documentation:

- A copy of your formal military orders.
- [Additional Requirement, if any]

Please provide these documents to the Human Resources department by [Deadline Date].

During your leave, your employment status will be protected in accordance with the Uniformed Services Employment and Reemployment Rights Act (USERRA). Regarding your benefits:

- **Health Insurance:** [Details about coverage continuation and premiums].
- **Paid Time Off:** You may choose to use accrued vacation time, but you are not required to do so.
- **Reemployment:** Upon completion of service, you must notify us of your intent to return to work within the timelines specified by law.

Please contact [HR Contact Name] at [Phone/Email] if you have questions regarding your benefits or the documentation required.

We thank you for your service.

Sincerely,

[Name]  
[Title]  
[Company Name]