

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

[Date]

[Recipient Name]  
[Recipient Job Title]  
[Company Name]  
[Company Address]

**Subject: Formal Request for Leave Extension and Inquiry Regarding Employment Rights**

Dear [Recipient Name],

I am writing to formally request an extension of my current leave of absence, which was originally scheduled to end on [Original Return Date]. Due to [briefly state reason, e.g., ongoing medical recovery/unforeseen personal circumstances], I am requesting to extend my leave until [New Proposed Return Date].

Attached to this letter, please find [mention any supporting documents, such as a doctor's note or medical certificate] confirming the necessity of this extension.

In light of this request, I would also like to clarify my rights and status regarding my employment. Specifically, I request information on the following:

- The impact of this extension on my job security and position reinstatement.
- The status of my employee benefits (health insurance, accruals, etc.) during this additional period.
- Confirmation of my rights under the [mention specific laws, e.g., Family and Medical Leave Act (FMLA), ADA, or local labor laws] as they apply to this extension.

I remain committed to my role at [Company Name] and intend to return to my duties as soon as I am able. I am happy to discuss a transition plan or provide any further information required to process this request.

Please let me know the next steps for approval and provide the requested information regarding my employment rights at your earliest convenience.

Sincerely,

[Your Signature]  
[Your Printed Name]