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

[Manager's Name or HR Department]
[Clinic Name]
[Clinic Address]

Subject: Request for Medical Clinic Bonding Leave

Dear [Manager's Name],

I am writing to formally request a leave of absence for the purpose of bonding with my [newborn child / newly adopted child / new foster child].

I am planning for my leave to begin on [Start Date] and I anticipate returning to my duties at the clinic on [Return Date].

During my absence, I will ensure that my current patient files and administrative responsibilities are up to date. I am happy to discuss a transition plan to ensure my colleagues can cover my shifts and patient care requirements effectively while I am away.

I have attached the necessary medical documentation/legal certification for your records. Please let me know if there are additional forms or procedures I need to complete according to our clinic's policy.

Thank you for your support during this important time for my family.

Sincerely,

[Your Signature]
[Your Printed Name]
[Your Phone Number]