**LEAVE OF ABSENCE LETTER**

**[Name]**

**[Address]**

**[Email address]**

**[Phone number]**

**[Date]**

**[Supervisor’s Name]**

**[Title]**

**[Organization]**

**[Address]**

**[City, State Zip Code]**

**Subject:** Medical Leave Request - Jonas Hemmingway

Dear Mr. Smith:

I would like to request a leave of absence for medical reasons. I will be having hernia surgery on September 1 and expect to return to work approximately three weeks later.

I can provide written documentation from the surgeon, if necessary.

Thank you very much for your consideration.

Sincerely,

**[Signature]**

Jonas Hemmingway
**[Address]**

**[Email address]**

**[Phone number]**