Leave Application for not Feeling Well

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| To: | Recipient Name |
| From: | Your Name |
| cc: | Name |
| Date: | Date |
| Subject: | One Day Leave for not Feeling Well |

Respected sir,

Yesterday at 2:30 P.M in the office I stood up from my seat and felt dizziness. I thought this might be due to sitting for too long, but the case is different. Again at 4:15 P.M I experience the same.

On returning home from the office I went to Dr. to get myself checked. Dr. conducted few medical tests and advised me to take one day off from the office. I was found to be overworking and not taking proper rest.

So, as per Dr. suggest me I need one day leave from the office. Please grant me leave for one day so that I can recover my energies to perform at my best.

Thanks

Your sincerely

[Name Here]

[Designation]