

Educational Leave Approval

Subject: Approval for Educational Leave of Absence

Dear [Employee Name],

We are pleased to approve your request for an educational leave of absence to pursue [Degree/Certification/Program Name] at [Institution Name].

Your leave will be effective from [Start Date] to [End Date]. We believe this educational opportunity will enhance your professional skills and contribute to your career development within our organization.

Please note that this leave is unpaid, though you may use any accrued vacation time if you wish.

Your position will be held for you during this period, and we expect your return on [Return Date].

Upon completion of your program, we ask that you share relevant knowledge or skills gained with your team. We also require a commitment to remain with the company for [Number] months following your return, as outlined in the educational leave agreement.

Please maintain contact with your supervisor periodically during your leave and notify us immediately if there are any changes to your expected return date.

We support your professional growth and look forward to your continued contributions to our team.

Best wishes,

[Manager Name]

[Title]

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