**MATERNITY LEAVE APPLICATION**

*Subject: Maternity leave application*

*Dear (Recipient’s Name)*

*I am (Name) working as a (Job Title) in (Department Name).*

*I am nearing the end of my pregnancy and hence seeking maternity leave as suggested by my doctor. I request you to kindly approve my maternity leave for the duration of (start date) to (end-date) as per company policy. My due date is (date).*

*As I will be away for a continued long period, I have assigned my duties and responsibilities to (colleague name). In case of any difficulty, you can reach out to me at my number (Contact no).*

*I have attached my medical certificate along with pregnancy proof submission and other relevant documents. Apart from this, I would also like to understand the insurance coverage for cashless billing process. Please let me know the concerned person for the same.*

*Thank you for your consideration.*

*Yours Sincerely*

*(Your Name)*