# Employer's Response to Request for FEDERAL Military Leave

Red text denotes a field that needs to be changed by the user.

[Date]

[Employee Name]  
[Street Address]  
[City, State ZIP]

Dear [Employee Name]

We have received and approved your request for military leave. Based on the information provided in your request, we anticipate that your first day of leave will be [Date] and your final day of military leave will be [Date]. We expect you to report to work on the first full regularly scheduled shift on the first full calendar day following the completion of your military service, transportation home, and an 8-hour period of rest. Therefore, your expected return to work date is [Date].

If for any reason you will not be able to return to work on this date, please contact us as soon as reasonably possible.

As requested on your leave form, your vacation will be applied as specified during this military leave:

[Reiterate the vacation requested on the form.]

We wish you all the best in your military service and look forward to your safe return to our company.

Sincerely,

[Signature]

[Manager’s Title]

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