

[Date]

[Manager Name or HR Department Name]

[Company Name]

[Company Address]

**Subject: Request for Temporary Role Reassignment - Pregnancy Accommodation**

Dear [Recipient Name],

I am writing to formally request a temporary role reassignment as a reasonable accommodation due to my pregnancy. Based on the advice of my healthcare provider, I have certain physical limitations that currently prevent me from performing the essential functions of my current role as [Current Job Title].

Specifically, my healthcare provider has recommended that I avoid [mention specific tasks, e.g., heavy lifting, standing for long periods, exposure to certain chemicals] starting on [Start Date]. These restrictions are expected to remain in place until [Expected End Date or Date of Maternity Leave].

I am fully committed to continuing my work with [Company Name] and would like to request a temporary transfer to a position that accommodates these restrictions. Possible alternatives we might discuss include:

- Temporary assignment to [Specific Department or Role Name].
- Administrative or sedentary tasks that do not require [Specific Physical Requirement].
- A modified version of my current role focusing on [Specific Tasks].

Attached is a medical certification from my healthcare provider outlining my functional limitations. I am available to meet at your earliest convenience to discuss how we can implement this accommodation to ensure a productive transition.

Thank you for your support and for assisting me in maintaining a healthy pregnancy while continuing to contribute to the team.

Sincerely,

[Your Name]

[Your Employee ID/Position]

[Your Phone Number]