

[Your Name]
[Your Address]
[Your Phone Number]
[Your Email Address]

[Date]

[Supervisor Name or HR Representative Name]
[Company Name]
[Company Address]

Subject: Request for Reasonable Accommodation - [Your Full Name]

Dear [Name of Supervisor or HR Professional],

I am writing this letter to formally request a reasonable accommodation for my work duties under the Americans with Disabilities Act (ADA) and/or applicable state laws.

I have a medical condition that limits my ability to [mention the specific task or function affected, e.g., sit for long periods, view a computer screen, or work in a loud environment].

I am requesting the following accommodation(s):

- [Description of specific request 1, e.g., A standing desk]
- [Description of specific request 2, e.g., A modified work schedule]
- [Description of specific request 3, e.g., Permission to work from home two days per week]

These accommodations will help me to perform the essential functions of my job effectively. I am open to discussing alternative suggestions that would also address my needs.

I have attached medical documentation from my healthcare provider that explains my functional limitations and supports my need for these accommodations. [Optional: or state "I can provide medical documentation if needed."]

I look forward to discussing this request with you at your earliest convenience to determine the best way to move forward. Thank you for your time and assistance.

Sincerely,

[Your Signature]

[Your Printed Name]