

[Date]

[Employee Name]

[Employee ID]

[Department]

Subject: Acknowledgment of Request for Reasonable Accommodation

Dear [Employee Name],

This letter confirms that the Human Resources Department has received your formal request for a reasonable accommodation dated [Date of Request].

We have received the following documentation/information regarding your request:

- [List document name or "Completed Accommodation Request Form"]
- [List medical certification, if applicable]

The next step in this process is the "interactive process." A representative from Human Resources will contact you by [Date] to schedule a meeting. The purpose of this meeting is to discuss your functional limitations and explore potential effective accommodations that will allow you to perform the essential functions of your position.

Please note that all medical information provided will be kept confidential and stored in a separate medical file, apart from your personnel file, in accordance with applicable privacy laws.

If you have any questions in the meantime, please contact [HR Contact Name] at [Phone Number] or [Email Address].

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title]

[Company Name]