

[Your Name]
[Your Job Title]
[Date]

To: [Manager's Name or HR Department]
[Company Name]

Subject: Extension of Reduced Working Hours Accommodation

Dear [Name],

I am writing to formally request an extension of my current reduced working hours accommodation, which is currently scheduled to end on [Current End Date].

Due to [briefly mention reason, e.g., ongoing medical treatment / recovery / personal circumstances], I am requesting to continue working [Number of Hours] hours per week until [Proposed New End Date].

I have attached updated documentation from my [medical provider/professional] to support this extension request. I remain committed to my role and will continue to ensure that my primary responsibilities are handled effectively during my scheduled hours.

I would appreciate the opportunity to discuss this request with you at your earliest convenience. Thank you for your continued support and understanding.

Sincerely,

[Your Signature]
[Your Printed Name]