

[Date]

[Recipient Name]
[Recipient Address]
[City, State, Zip Code]

Re: Revocation of Medical Clearance for [Mission Trip Name/Destination]

Dear [Recipient Name],

We are writing to formally notify you that your medical clearance for the upcoming mission trip to [Destination], scheduled for [Dates], has been revoked effective immediately.

This decision was made following a review of [mention reason: e.g., recent medical evaluations, changes in health status, or failure to meet specific health requirements]. Based on this information, it has been determined that participating in this mission would present an undue risk to your health and safety, as well as the overall safety of the team.

As a result of this revocation, you are no longer authorized to participate in this specific trip. We understand this may be disappointing news, but our primary priority is your physical well-being and the success of the mission.

If you have questions regarding this decision or wish to discuss the specific health criteria required for future trips, please contact [Name of Medical Coordinator/Officer] at [Phone Number/Email].

We appreciate your heart for service and encourage you to re-apply for future opportunities once your health status aligns with the mission requirements.

Sincerely,

[Signature]
[Name of Medical Officer or Program Director]
[Organization Name]