

[Physician/Mental Health Professional Name]  
[License Number and State]  
[Clinic Name]  
[Address]  
[Phone Number]  
[Date]

To [Employer Name or HR Department],

I am the healthcare provider for [Patient Name], and I am writing to support their request for a workplace accommodation.

[Patient Name] has a diagnosed mental health condition that meets the definition of a disability under the Americans with Disabilities Act (ADA). This condition limits one or more major life activities.

As part of the treatment plan for this condition, I have prescribed an Emotional Support Animal (ESA). The presence of this animal is necessary to mitigate specific symptoms of the patient's disability, allowing them to perform their essential job functions and manage workplace stress effectively.

The animal is a [Species, e.g., Dog/Cat] named [Animal Name].

I recommend that [Patient Name] be permitted to have their Emotional Support Animal with them in the workplace as a reasonable accommodation.

If you have any further questions or require additional documentation, please contact my office.

Sincerely,

[Signature]  
[Printed Name and Title]