

[Date]

[Name of School/Employer/Organization]

[Address]

[City, State, Zip Code]

Subject: Request for Reasonable Accommodation - Severe Food Allergy Buffer Zone

Dear [Name of Administrator, Supervisor, or HR Representative],

I am writing to formally request a reasonable accommodation for [Student/Employee Name], who has a life-threatening food allergy to [specify allergen, e.g., peanuts/tree nuts]. This condition is a disability as defined under the [Americans with Disabilities Act (ADA) / Section 504 of the Rehabilitation Act].

To ensure a safe environment and prevent accidental exposure or anaphylaxis, I am requesting the establishment of a "Buffer Zone" in [Student/Employee Name]'s immediate vicinity. Specifically, I am requesting the following:

- A designated [desk/workstation/table] that is strictly free of [allergen].
- A minimum safety perimeter of [number] feet surrounding the seating area where the allergen is not permitted to be consumed or stored.
- Clear signage or notification to surrounding [students/colleagues] regarding the restricted area.
- Access to a hand-washing or surface-cleaning protocol for those entering the immediate area.

Attached is medical documentation from [Doctor's Name] confirming the severity of this allergy and the necessity of these environmental controls. This accommodation is necessary to allow [Student/Employee Name] to [attend class/perform job duties] safely and effectively.

I would like to discuss this request with you at your earliest convenience to ensure a plan is implemented immediately. Thank you for your cooperation and commitment to safety.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Phone Number]

[Your Email Address]