

Date: [Insert Date]

To: [Employee/Patient Name]

Address: [Insert Address]

ID Number: [Insert ID Number]

Subject: SECOND WARNING: Failure to Attend Mandatory Psychiatric Evaluation

Dear [Employee/Patient Name],

This letter serves as a formal second warning regarding your failure to attend your scheduled psychiatric evaluation. Our records indicate that you missed your appointment on [Date] at [Time] with [Name of Professional/Clinic].

As previously stated in our first warning dated [Date of First Letter], this evaluation is a mandatory requirement for [state reason, e.g., your continued employment / fitness for duty / treatment compliance].

You are now required to reschedule this appointment immediately. Please contact [Department/Name] at [Phone Number] or [Email] by [Deadline Date] to confirm your new appointment time.

Please be advised that failure to comply with this requirement or a further missed appointment may result in disciplinary action, up to and including [state consequence, e.g., termination of employment / suspension of benefits].

If you have already attended this evaluation or have a documented emergency that prevented your attendance, please provide the necessary documentation to [Department Name] immediately.

Sincerely,

[Your Name]

[Your Title]

[Company/Organization Name]