

Health Benefits Enrollment Request

Your Name: [Your Name]

Your Address: [Your Address]

Your Email: [Your Email]

Your Phone Number: [Your Phone Number]

Date: [Current Date]

To:

HR Department

[Company Name]

[Company Address]

Subject: Enrollment Request for Health Benefits

Dear HR Team,

I am writing to formally request enrollment in the health benefits program available through [Company Name]. I understand that I am eligible for these benefits and would like to ensure my timely enrollment.

For your reference, I have attached the necessary documents required for the enrollment process.

Please let me know if any additional information is needed. I look forward to your prompt response.

Thank you for your assistance.

Sincerely,

[Your Name]