

Immunization Record Request for Employment Verification

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Recipient Name]

[Recipient's Title/Position]

[Company/Organization Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient Name],

I am writing to request my immunization records for the purpose of employment verification. I am in the process of [describe the job opportunity or reason for verification], and the employer has requested this information as part of the onboarding process.

My details are as follows:

- **Name:** [Your Full Name]
- **Date of Birth:** [Your Date of Birth]
- **Social Security Number:** [Your SSN]

Please send my immunization records to the address above or via email at [Your Email Address]. If there are any forms or additional information needed to complete this request, please let me know.

Thank you for your attention to this matter. I appreciate your prompt response.

Sincerely,

[Your Name]