## **Appointment Request for ENT Evaluation**

Date: [Insert Date]
[Your Name]
[Your Address]
[City, State, Zip Code]
[Your Email]
[Your Phone Number]
Dear [ENT Specialist's Name],
I am writing to request an appointment for an Ear, Nose, and Throat (ENT) evaluation. I have been experiencing [briefly describe symptoms or reasons for evaluation] and believe it would beneficial to consult with you regarding my condition.
Please let me know your available times for the appointment. I am flexible with dates and times but would prefer [insert your preferred days/times].
Thank you for your attention to this matter. I look forward to your prompt response.
Sincerely,
[Your Name]