

Request for Workplace Accommodations

Your Name

Your Address

City, State, Zip Code

Email Address

Phone Number

Date

Employer's Name

Company's Name

Company's Address

City, State, Zip Code

Dear [Employer's Name],

I am writing to formally request workplace accommodations due to my disability. I have been diagnosed with [specific disability] which impacts my ability to [briefly explain how the disability affects your work].

To ensure that I can perform my job effectively, I am requesting the following accommodations: [list specific accommodations you are requesting].

I believe that these adjustments will allow me to continue contributing to [Company's Name] effectively and efficiently. I am open to discussing these accommodations and exploring additional options that may also meet my needs.

Thank you for considering my request. I look forward to your prompt response.

Sincerely,

Your Name