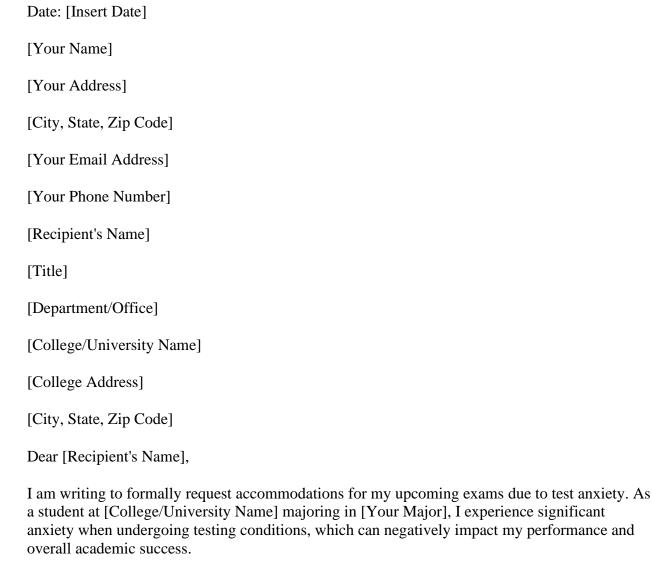
## **Request for Test Anxiety Accommodations**



To support my request, I have attached documentation from my healthcare provider that outlines my condition and the need for specific accommodations. I would appreciate the following adjustments during my exams:

- Extended time on all exams
- A separate setting to reduce anxiety-inducing stimuli
- Flexible scheduling options to take exams when I feel most prepared

These accommodations would greatly enhance my ability to demonstrate my knowledge and skills on assessments. I am committed to my studies and want to ensure that I can perform to the best of my abilities.

Thank you for considering my request. Please let me know if you require any additional information or documentation. I look forward to your response.

Sincerely,

[Your Name]

[Your Student ID Number]