

# Request for Health Screening Appointment

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Clinic/Hospital Name]

[Clinic/Hospital Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to request an appointment for a health screening at your facility. I would like to address my health concerns and ensure that I am maintaining my well-being.

Please let me know the available dates and times for the screening. I am looking forward to your prompt response.

Thank you for your attention to this matter.

Sincerely,

[Your Name]