

# Request for Specialist Evaluation

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Title]

[Institution/Organization Name]

[Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request an independent evaluation by a qualified specialist. The reason for this request is [briefly describe the reason for the evaluation, e.g., ongoing health issues, educational needs, etc.].

I believe that an external evaluation by a specialist in [specific field] will provide valuable insight and assistance in addressing my concerns. I would appreciate your support in facilitating this process.

Thank you for considering my request. Please let me know if you require any additional information.

Sincerely,

[Your Name]