

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Recipient's Name]

[Recipient's Title]

[Company/Organization Name]

[Company/Organization Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request an exemption from [specific requirement or policy] due to my current health conditions.

I have been diagnosed with [specific health condition], which significantly impacts my ability to [explain how it affects you in relation to the requirement]. My doctor has advised that [briefly state doctor's recommendation or medical advice related to the exemption request].

Given these circumstances, I kindly ask for your consideration in granting this exemption. I believe it is crucial for my health and well-being, and I am willing to provide any necessary medical documentation to support my request.

Thank you for your understanding and attention to this matter. I look forward to your positive response.

Sincerely,

[Your Name]