

ADA Accommodation Request Letter

Date: [Insert Date]

[Your Name] [Your Address] [City, State, Zip Code] [Email Address] [Phone Number]

[Recipient's Name] [Organization Name] [Organization Address] [City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request accommodation under the Americans with Disabilities Act (ADA) for [specific service or activity] provided by [Organization Name]. Due to my [describe your disability], I am unable to fully participate in [describe the specific activity or service] without the following accommodations: [list specific accommodations needed].

I would appreciate your prompt attention to this matter, as it impacts my ability to [explain the importance of the service]. If needed, I can provide documentation from my healthcare provider to support my request.

Thank you for your consideration. I look forward to your reply.

Sincerely,

[Your Name]