

# Request for Mental Health Evaluation

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Title]

[Organization/Institution Name]

[Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request a mental health evaluation. I have been experiencing [briefly describe symptoms or concerns], and I believe it is important to seek professional assistance to better understand and address these issues.

My primary concerns include [list specific concerns or symptoms], and I hope to have a thorough evaluation to determine the best course of action moving forward.

Please let me know the steps I need to take in order to schedule this evaluation. I am willing to provide any necessary documentation and would appreciate any guidance on how to proceed.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]