

# Request for Special Assistance in Workplace Adjustments

Date: [Insert Date]

[Recipient's Name]

[Recipient's Title]

[Company Name]

[Company Address]

Dear [Recipient's Name],

I am writing to formally request special assistance regarding workplace adjustments due to [briefly state your situation, e.g., a medical condition, disability, etc.].

Given my circumstances, I believe that the following adjustments would significantly enhance my ability to perform my job effectively: [list specific adjustments you are requesting, e.g., flexible working hours, ergonomic equipment, remote work options, etc.].

These adjustments will not only support my performance but also contribute positively to the overall workplace environment. I am committed to my role and eager to continue contributing to the team.

I would appreciate the opportunity to discuss this matter further and explore potential solutions. Thank you for considering my request.

Sincerely,

[Your Name]

[Your Job Title]

[Your Contact Information]