

Letter of Appeal for Delay in Immunization Documentation

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 hope this letter finds you well. I am writing to formally appeal for an extension regarding the submission of my immunization documentation, which is due on [Insert Due Date]. Due to [briefly explain the reason for the delay, e.g., personal circumstances, health issues, etc.], I am unable to provide the required documentation by the specified date.

I understand the importance of complying with immunization requirements, and I am committed to ensuring that I fulfill these obligations as soon as possible. Therefore, I kindly ask for an extension of [insert number of days/weeks needed] so that I may obtain the necessary documents from my healthcare provider.

Thank you for considering my request. I appreciate your understanding and support in this matter. I look forward to your positive response.

Sincerely,

[Your Name]