

Request for Extension on Immunization Record Submission

Date: [Insert Date]

To: [Recipient's Name]
[Recipient's Title]
[Recipient's Institution/Organization]
[Recipient's Address]

Dear [Recipient's Name],

I am writing to formally request an extension for the submission of my immunization records, originally due on [Original Due Date]. Due to [brief explanation of the reason for the delay, e.g., unforeseen circumstances, personal matters, or health issues], I am unable to meet the deadline.

Understanding the importance of compliance, I have taken proactive steps to obtain the necessary documents from my healthcare provider. However, I will need additional time to complete this process. I kindly ask for an extension until [Requested New Due Date].

Thank you for considering my request. I appreciate your understanding and support in this matter. Please let me know if you need any further information or documentation regarding my situation.

Sincerely,

[Your Name]
[Your Address]
[Your Phone Number]
[Your Email Address]