

[Your Name]
[Your Address]
[City, Postal Code]
[Email Address]
[Phone Number]
[Date]

Driver and Vehicle Licensing Agency

[DVLA Address]
[City, Postal Code]

Subject: Request to Reschedule Driving Test

Dear Sir/Madam,

I am writing to formally request the rescheduling of my driving test originally scheduled for [original test date] at [test center location]. Unfortunately, due to [brief reason for rescheduling, e.g., a personal emergency, illness], I am unable to attend on that date.

I would appreciate your assistance in rescheduling my driving test to a later date. I am available on the following dates: [list alternative dates].

Please let me know if you require any additional information or documentation.

Thank you for your understanding and assistance.

Yours sincerely,

[Your Signature (if sending by post)]

[Your Printed Name]

[Your Driving Test Reference Number]