

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Recipient Name]  
[School Name]  
[School Address]  
[City, State, Zip Code]

Dear [Recipient Name],

I am writing to request support services for my child, [Child's Name], who has been diagnosed with [specific condition, e.g., ADHD]. After consulting with our healthcare provider, [Doctor's Name], it has been recommended that [Child's Name] be prescribed Vyvanse to assist with their focus and attention in the academic setting.

To ensure [Child's Name] receives the proper support while taking Vyvanse, I am requesting the following accommodations:

1. [Accommodation 1, e.g., extended time on tests]
2. [Accommodation 2, e.g., a quiet space for testing]
3. [Accommodation 3, e.g., regular check-ins with a support staff member]

I believe these accommodations will significantly assist [Child's Name] in achieving their academic goals and managing their symptoms effectively. Please let me know if you require any additional information or documentation regarding this request.

Thank you for your attention to this matter. I look forward to working together to support [Child's Name]'s educational experience.

Sincerely,

[Your Name]

[Your Relationship to Child, e.g., Parent, Guardian]