

Please issue letter on appropriate Letterhead, if applicable

RE: Student Name (Unique Identifier)

Date: XX/XX/XXXX

To Whom it May Concern,

I have been seeing PATIENT about their illness or medical condition. It is my professional opinion that PATIENT requires a reduced course load of 0 credits starting on DATE due to their illness or medical condition. Based on the treatment plan for PATIENT, I recommend that they remain in the U.S. to have continued access to qualified professionals who understand their case and can continue treatments effectively.

\*Physical, Wet Signature Required\*