

Incapacity Assessment Letter

Date:

To Whom It May Concern,

This letter is to certify that has been assessed by me on . After a thorough evaluation, it is my professional opinion that the above-named individual is currently suffering from an incapacity due to .

The incapacity commenced on and is expected to continue until . As a result, is unable to perform regular duties or attend to daily responsibilities during this period.

If further information is required, please do not hesitate to contact me.

Sincerely,