

[Letterhead]

[Date]

To Whom It May Concern:

_____ (*Name of patient*) is my patient and has been under my care since _____ (*date*). I am familiar with his/her history and with the functional limitations imposed by his/her emotional/mental health-related issue which appears in the DSM-IV.

Due to this emotional disability, _____ (*patient name*) has certain limitations coping with what would otherwise be considered normal, but significant day to day situations. To help alleviate these challenges and to enhance his/her day to day functionality, I have prescribed _____ (*patient name*) to obtain an emotional support animal. The presence of this animal is necessary for the mental health of _____ (*patient name*) because its presence will mitigate the symptoms he/she is currently experiencing in a way that significantly improves his/her day to day life.

Sincerely,

(Signature)

(Physician/therapist's name and title)