${LETTER\_HEAD\_IMAGE}

${DATE1}

To Whom It May Concern:

${TITLE} ${FIRST\_NAME} ${LAST\_NAME} is currently engaged in mental health services through my private practice and has completed a thorough psychosocial assessment to determine ${HIS\_OR\_HER} need for an Emotional Support Animal as part of ${HIS\_OR\_HER} overall treatment plan. I am familiar with ${HIS\_OR\_HER} history and with the functional limitations imposed by ${HIS\_OR\_HER} psychological impairment, as defined by the Diagnostic and Statistical Manual – Edition 5.

Due to ${TITLE} ${LAST\_NAME}’s disability, an emotional support animal is required to help mitigate psychological symptoms. I have therefore prescribed an emotional support animal that will assist ${TITLE} ${LAST\_NAME} in coping with ${HIS\_OR\_HER} disability. The presence of this emotional support animal is necessary for ${TITLE} ${LAST\_NAME}’s mental health.

${PET\_BREED\_BLOCK}

Please allow ${TITLE} ${FIRST\_NAME} ${LAST\_NAME} to be accompanied by ${HIS\_OR\_HER} ${PET\_TYPE}, a ${PET\_WEIGHT}lb ${PET\_BREED} in the cabin of the aircraft during travel, which may include holding or being in direct contact with the animal during the duration of the flight in accordance with airline policies. This letter expires on ${ONE\_YEAR}, at which time ${FIRST\_NAME} ${LAST\_NAME} will be assessed for continued need of an emotional support animal. I am licensed by the state of ${STATE} to practice Psychotherapy. My license, ${LICENSE\_NUMBER}, was issued on ${ISSUE\_DATE}.

${/PET\_BREED\_BLOCK}

${NO\_PET\_BREED\_BLOCK}

Please allow ${TITLE} ${FIRST\_NAME} ${LAST\_NAME} to be accompanied by ${HIS\_OR\_HER} ${PET\_TYPE} in the cabin of the aircraft during travel, which may include holding or being in direct contact with the animal during the duration of the flight in accordance with airline policies. This letter expires on ${ONE\_YEAR}, at which time ${FIRST\_NAME} ${LAST\_NAME} will be assessed for continued need of an emotional support animal. I am licensed by the state of ${STATE} to practice Psychotherapy. My license, ${LICENSE\_NUMBER}, was issued on ${ISSUE\_DATE}.

${/NO\_PET\_BREED\_BLOCK}

${CUSTOM\_DATA}

Sincerely,

[sig|req|signer1]

${SIGNATURE}

Licensed Mental Health Professional

${STATE} License # ${LICENSE\_NUMBER}

CC: Client’s Clinical Chart