

March 29, 2023

To Whom It May Concern,

I met with 'IDOC resident name'. This letter is to inform you that 'IDOC resident name' has a verified 'medical diagnosis' that affects his/her ability to 'affects to learning ability'. Recommended accommodations, if applicable.

Thank you,

IDOC Rep Signature  
381 W Hospital Drive  
Orofino, ID 83544  
208.476.3655