Dear [Manager's Name],

I am writing to request approval to attend the American Society for Health Care Risk Management (ASHRM) Academy 2025, scheduled for March 17-22, in Orlando, FL. This event stands as a pinnacle gathering for professionals in health care risk management, offering an unparalleled opportunity for educational and professional development.

ASHRM Academy is renowned for its practical approach to teaching risk management concepts, where attendees learn theoretical aspects but also how to implement these strategies effectively in our work. The academy features in-depth discussions, interactive learning sessions, and networking opportunities with top risk management leaders. This focused, intimate learning environment is ideal for personal and professional growth.

I am confident that attending this event will significantly enhance my expertise in the health care risk management and prepare me for my role, thereby directly benefiting our organization. Here are some specific advantages:

* **Relevance to Job Responsibilities:** The [insert certificate program] offered at ASHRM Academy aligns closely with my current job responsibilities and the goals of our department. The event covers topics such as [insert topic 1], [insert topic 2], and [insert topic 3], which are directly related to the projects I am currently working on.
* **Skill & Expertise Development:** I am planning to take [insert certificate program] focused on the practical application of risk management concepts, ensuring that I not only understand theory but I can effectively implement it in my various work areas, such as [insert area 1], [insert area 2], and [insert area 3]. These skills are crucial for my current role and align with the strategic objectives of our team.
* **Networking Opportunities:** ASHRM Academywill bring together professionals from large and small health care organizations from across the country, offering an excellent platform for building relationships that can lead to valuable insights, collaborations, and potential partnerships benefiting our team and organization.
* **Professional Development** [if applicable]: I can earn continuing education credits to maintain and enhance my professional qualifications. I need [insert number] credits to keep my [insert credential] current.

The estimated investment for my attendance is as follows:

|  |  |
| --- | --- |
| Travel Costs |  |
| Accommodations |  |
| Meals |  |
| Registration |  |
|  | **Total Cost to Attend:**  |

Registering before the Early Bird deadline offers a significant saving, which I can put toward my travel expenses. Therefore, I would appreciate a prompt response to facilitate timely registration.

For more information about ASHRM Academy 2025, please visit [ashrm.org/academy](https://www.ashrm.org/academy).

Thank you very much for considering my request. I am eager to bring back valuable knowledge and insights that will contribute to our organization's continued success and resilience in health care risk management.

Sincerely,

[Your Name]

[Your Position]