

Referral to Social Work Services

Date: [Insert Date]

To: [Social Work Service Name]

Address: [Social Work Service Address]

City, State, Zip: [City, State, Zip]

Dear [Social Work Service Contact Name],

I am writing to refer [Client's Name], who I believe would benefit from your social work services. [Client's Name] is currently experiencing [briefly describe the situation or issues - e.g., mental health challenges, family issues, housing instability, etc.].

Background information:

- **Client's Age:** [Age]
- **Relevant History:** [Brief history related to the referral]
- **Current Support Systems:** [Family, friends, community resources, etc.]

I believe that your expertise can provide [Client's Name] with the necessary support and resources to improve their situation. I have obtained consent from [Client's Name] to share their information regarding this referral.

Please feel free to contact me at [Your Phone Number] or [Your Email Address] if you require additional information or wish to discuss this referral further.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title/Position]

[Your Organization]

[Your Contact Information]