

Letter of Recommendation

Date: [Insert Date]

To Whom It May Concern,

I am writing to highly recommend [Therapist's Name/Clinic Name] as an exceptional provider of autism therapy services. Over the past [duration], I have had the privilege of working with [him/her/them] and have witnessed firsthand the positive impact [he/she/they] has made on my child, [Child's Name].

[Therapist's Name] has shown an unparalleled commitment to understanding and addressing the specific needs of children on the autism spectrum. [He/She/They] has utilized a variety of evidence-based techniques that have not only helped my child improve [his/her/their] social skills but also fostered a greater sense of confidence and independence.

The personalized approach and compassion demonstrated by [Therapist's Name] truly sets [him/her/them] apart. [He/She/They] creates a nurturing and encouraging environment that allows children to thrive while making progress in their therapy goals.

I am more than confident in recommending [Therapist's Name/Clinic Name] to any family seeking support for their child with autism. [His/Her/Their] expertise, dedication, and genuine care for the well-being of the children [he/she/they] serves is evident in all aspects of [his/her/their] work.

If you would like to discuss my experience further, please feel free to contact me at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Name]

[Your Title/Relationship to Child]

[Your Address]