

Request for Enrollment in Witness Protection Program

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

To Whom It May Concern,

I am writing to formally request enrollment in the Witness Protection Program due to the imminent threat to my safety. My name is [Your Name], and I have recently [briefly describe the situation--e.g., witnessed a crime, cooperated with law enforcement].

As a result of my involvement, I have been subjected to [describe any threats or unsafe situations]. I believe that my ongoing safety is at significant risk and that enrolling in the Witness Protection Program is essential for my protection.

I am willing to provide further details regarding my situation and cooperate fully with any investigations. I kindly request a prompt response regarding my application for the program.

Thank you for your attention to this matter. I look forward to your swift reply.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]