

# Witness Protection Enrollment Inquiry

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Your Email Address]

[Your Phone Number]

[Recipient Name]

[Agency Name]

[Agency Address]

[City, State, ZIP Code]

Dear [Recipient Name],

I hope this letter finds you well. I am writing to inquire about the enrollment process for the Witness Protection Program. Due to [briefly explain your situation], I am concerned for my safety and the safety of my family.

Could you please provide me with information regarding the eligibility criteria, enrollment steps, and any necessary documentation required for the application? I appreciate any assistance you can provide in this matter.

Thank you for your attention to this urgent matter. I look forward to your prompt response.

Sincerely,

[Your Name]