

Termination of Services Notification

Date: [Insert Date]

To: [Client's Name]

[Client's Address]

[City, State, ZIP Code]

Dear [Client's Name],

We regret to inform you that after careful consideration, we have decided to terminate the services provided to you by [Agency Name] effective [Termination Date]. This decision has not been made lightly, but we believe it is in the best interest of all parties involved.

The reason for this termination is as follows:

[Briefly explain the reason for termination, e.g., non-compliance with program requirements, change in eligibility, etc.]

We appreciate the opportunity to have served you and remain committed to assisting you in transitioning to other services that may be beneficial. Please feel free to reach out to us for any referrals or resources that may be helpful during this time.

If you have any questions or need further clarification, do not hesitate to contact us at [Agency Phone Number] or [Agency Email Address].

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Position]

[Agency Name]

[Agency Address]

[City, State, ZIP Code]

[Agency Phone Number]