

Request for Referral for Mental Health Services

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Recipient's Title]

[Organization Name]

[Organization Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally request a referral for mental health services to assist with my post-traumatic stress disorder (PTSD). I have been experiencing symptoms that significantly affect my daily life and functioning.

After discussing my situation with my primary care provider, it was suggested that I seek specialized mental health assistance. I am particularly interested in services that focus on trauma-informed care and evidence-based therapies for PTSD.

Please let me know if you need any additional information to facilitate this referral. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your support.

Sincerely,

[Your Name]