

# Post-Care Support Letter

Date: [Insert Date]

Dear [Recipient's Name],

We hope this letter finds you well. As you transition from our rehabilitation program, we want to ensure that you continue to receive the support you need to maintain your progress and enhance your well-being.

## Ongoing Support:

- Weekly follow-up sessions to discuss your progress and address any challenges.
- Access to support groups where you can connect with others who share similar experiences.
- Resources for job placement assistance and skill development programs.

## Contact Information:

If you have any questions or need additional support, please do not hesitate to contact us:

Email: [Insert Email] | Phone: [Insert Phone Number]

We are committed to your journey and look forward to supporting you in the next steps of your recovery.

Sincerely,

[Your Name]

[Your Title]

[Organization Name]

[Organization Address]