

Letter of Appeal for Rehabilitation Assistance

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Title]

[Organization's Name]

[Organization's Address]

[City, State, ZIP Code]

Dear [Recipient's Name],

I am writing to formally appeal for assistance in addressing my substance abuse issues. I have been struggling with [specific substance] addiction for [duration] and it has significantly impacted my life.

After considerable reflection, I realize that I need professional help to overcome this challenge. Unfortunately, my current financial situation does not allow me to cover the costs of rehabilitation programs. I am seeking your support in accessing rehabilitation assistance that would provide me with the resources necessary for recovery.

I have attached my medical records and any relevant documentation to support my appeal. I sincerely hope for your understanding and assistance in this critical time in my life.

Thank you for considering my request. I look forward to your positive response.

Sincerely,

[Your Name]