

# Request for Substance Abuse Counseling Services

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Recipient's Name]

[Recipient's Title/Position]

[Organization's Name]

[Organization's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to formally request counseling services for substance abuse. I believe that professional support is necessary for my recovery journey.

I would like to discuss available options, programs, and how to initiate services. Please let me know a suitable time for us to connect.

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

Sincerely,

[Your Name]