

# Referral for Mental Health Therapy

**Date:** [Insert Date]

**To:** [Therapist's Name]  
[Therapist's Address]  
[City, State, Zip Code]

Dear [Therapist's Name],

I am writing to refer my patient, [Patient's Name], for mental health therapy. [He/She/They] has been experiencing [brief description of symptoms/issues], which have significantly impacted [his/her/their] daily functioning and overall well-being.

During our sessions, [Patient's Name] has expressed [his/her/their] desire to seek additional support and has shown readiness to engage in therapy. I believe that [he/she/they] would greatly benefit from your expertise in [specific area of therapy].

Please find attached any relevant medical records and assessments to assist you in understanding [Patient's Name]'s condition better.

Thank you for considering this referral. I appreciate your attention to this matter and look forward to hearing from you.

Sincerely,

[Your Name]  
[Your Position]  
[Your Contact Information]  
[Your Practice/Organization Name]