

# Referral for Alcohol Rehabilitation Program

Date: [Insert Date]

To Whom It May Concern,

I am writing to formally refer [Client's Name], a [Client's Age]-year-old individual, to your esteemed alcohol rehabilitation program. I believe that [he/she/they] would greatly benefit from the comprehensive treatment and support offered by your facility.

[Client's Name] has been struggling with alcohol dependence for [insert duration], which has negatively impacted [his/her/their] personal and professional life. Despite [his/her/their] efforts to manage [his/her/their] consumption, [he/she/they] has found it increasingly difficult to maintain sobriety.

During our sessions, it has become clear that [Client's Name] is motivated to make a change and is ready to commit to a structured rehabilitation program. I believe that your program's focus on [mention specific aspects of the program, e.g., counseling, group therapy, aftercare] aligns perfectly with [his/her/their] needs.

Please find enclosed [any relevant documents, if applicable], which provide further details about [his/her/their] background and history. I trust that you will provide [Client's Name] the care and attention [he/she/they] requires to achieve a successful recovery.

Thank you for considering this referral. If you have any questions or need additional information, please do not hesitate to contact me at [Your Phone Number] or [Your Email Address].

Sincerely,

[Your Name]

[Your Title/Position]

[Your Organization]

[Your Contact Information]