Beneficiary Needs Assessment Letter

Date: [Insert Date] To: [Alliance Partner Name] Address: [Alliance Partner Address] Dear [Alliance Partner Contact Name], We hope this letter finds you well. As part of our ongoing commitment to ensuring the effectiveness of our programs, we are conducting a Beneficiary Needs Assessment. This initiative aims to gather essential insights into the needs and preferences of our beneficiaries to enhance our collaborative efforts. We kindly request your cooperation in distributing our assessment survey among your network of beneficiaries. The information collected will be invaluable in guiding our collective strategy and ensuring that our interventions are effectively addressing the needs of those we serve. The assessment will cover various aspects, including: • Current challenges faced by beneficiaries Access to services and resources • Suggestions for improvement Please find attached the survey link and accompanying materials for your reference. We would appreciate it if you could share this information by [insert deadline]. Thank you for your continued partnership and support. We look forward to collaborating with you to better serve our communities. Sincerely, [Your Name] [Your Position] [Your Organization]

Contact Information: [Your Email] | [Your Phone Number]