

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Organization/Company Name]
[Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Hardship Request for BGT Program

I am writing to formally request consideration for hardship assistance regarding my participation in the BGT program due to [briefly explain your situation, e.g., financial difficulties, medical issues, unexpected life events].

[Provide a detailed account of your circumstances. Explain how these have impacted your ability to participate in the program, including any relevant financial information, personal challenges, or supporting documentation you can provide.]

I have taken steps to address my situation [mention any actions you have taken, such as seeking alternative resources, applying for assistance, etc.], but I am still struggling to meet the required standards for the program.

I kindly ask that you review my situation and consider granting me assistance or a temporary waiver, as it would greatly aid me during this challenging time.

Thank you for your understanding and support. I hope to hear from you soon.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]