

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Recipient Name]
[Department of Human Services]
[Office Address]
[City, State, Zip Code]

Subject: Appeal for DHS Application - [Your Case Number or Application ID]

Dear [Recipient Name],

I hope this letter finds you well. I am writing to formally appeal the decision regarding my application for [specific program or service] under the Department of Human Services, as communicated to me on [date of decision]. My case number is [case number or application ID].

[Briefly explain the reason for the appeal, detailing any misunderstandings or miscommunications that may have occurred. Be clear and concise.]

I believe that [explain your supporting reasons or provide additional information that strengthens your case].

I respectfully request a reconsideration of my application based on the information provided. I am eager to resolve this matter and am willing to provide any further documentation or clarification needed to support my appeal.

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

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]