

[Your Name]  
[Your Address]  
[City, Postal Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Recipient's Name]  
[Recipient's Position]  
[Organization/Agency Name]  
[Organization/Agency Address]  
[City, Postal Code]

Dear [Recipient's Name],

Subject: Request for DLA Support for [Child's Name]

I am writing to formally request Disability Living Allowance (DLA) support for my child, [Child's Name], who is [Child's Age] years old and has been diagnosed with [specific diagnosis or condition].

[Provide a brief introduction about your child. Include relevant details about their age, any specific needs, and a summary of their condition.]

Due to [Child's Name]'s condition, they experience [describe in detail the specific challenges your child faces, including physical, emotional, and behavioral issues]. These challenges significantly impact their daily life and the care that is required from me as a parent/guardian.

[In this paragraph, detail the specific support needs of your child.

Include how frequently assistance is needed for activities such as personal care, supervision, communication, mobility, and any educational support.]

We have noticed that [Child's Name] struggles with [specific situations or activities], leading to [describe the implications of these struggles on daily living, social participation, and overall well-being]. Due to these challenges, I have to devote a considerable amount of time to ensure their safety and welfare.

[If applicable, mention any existing support, therapies, or treatments your child is receiving, and how these are not sufficient to meet their needs.]

Given these circumstances, I believe that DLA support would greatly assist our family in managing [Child's Name]'s care needs effectively. The financial assistance would enable us to [explain how the funding will be used, e.g., cover therapy costs, special equipment, etc.].

I have included [list any additional forms, evidence, or documentation you are attaching - e.g., medical reports, assessments from health professionals] to support this application for DLA.

Thank you for considering our request. I hope to hear from you soon regarding the next steps in this application process.

Yours sincerely,

[Your Name]  
[Your Signature (if sending a hard copy)]  
[Your Relationship to the Child]