

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

Dear [Recipient's Name],  
I hope this letter finds you well. I am writing to formally request the appointment of guardianship over [Disabled Adult's Name], who is currently [age] and has been diagnosed with [specific disability or condition].

As [his/her/their] [relationship to the disabled adult, e.g., parent, sibling, relative, close friend], I have observed firsthand the challenges [he/she/they] faces in managing daily activities and making competent decisions regarding [his/her/their] health and welfare. I believe that becoming [his/her/their] legal guardian would enable me to provide [him/her/them] with the necessary support and guidance to ensure [his/her/their] well-being and to make decisions in [his/her/their] best interest.

Attached to this letter are the necessary documents supporting this request, including [list any documents such as medical evaluations, financial statements, etc.].

I appreciate your attention to this matter and look forward to your response. Please do not hesitate to reach out if further information is required.

Thank you for considering my request.

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