

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

[Recipient Name]  
[Recipient Title/Organization]  
[Recipient Address]  
[City, State, ZIP Code]

Dear [Recipient Name],

Subject: IHSS Waiver Request

I hope this letter finds you well. I am writing to formally request a waiver for the In-Home Supportive Services (IHSS) program due to [specific reason for the request, e.g., change in circumstances, need for additional hours, etc.].

[Briefly explain your situation, including any relevant details that support your request. Mention any previous approvals or changes, if applicable.]

With this waiver, I would be able to [explain how the waiver would improve your situation or provide necessary support]. I have attached any relevant documentation that provides further information regarding my request.

Thank you for considering my request. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]