

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

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

Dear [Recipient's Name],

I am writing to formally express my intention to provide in-home supportive services (IHSS) as a caregiver for [Recipient's Name] who requires assistance due to [specific condition or disability]. I have been trained and possess the necessary skills to ensure [his/her/their] safety, comfort, and overall well-being.

**\*\*Caregiver Qualifications:\*\***

- [Number] years of experience in caregiving
- Certification in [relevant certifications such as CPR, First Aid, etc.]
- Experience with [specific conditions, e.g., dementia, mobility issues, etc.]

**\*\*Scope of Services:\*\***

I am committed to providing the following services:

1. Personal care assistance (bathing, grooming, dressing)
2. Meal preparation and dietary management
3. Medication management and reminders
4. Light housekeeping and laundry
5. Transportation and assistance with errands

**\*\*Availability:\*\***

I am available to provide care [days of the week] from [start time] to [end time]. I am flexible and can adjust my schedule to meet [Recipient's Name]'s needs.

**\*\*References:\*\***

I am happy to provide references from previous clients or employers as needed.

Thank you for considering my application. I look forward to the opportunity to support [Recipient's Name] in [his/her/their] daily activities and enhance [his/her/their] quality of life.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]