

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

Dear [Recipient Name],

I am writing to provide a reference for [Provider's Name], who has worked as an IHSS provider for [duration of employment]. Throughout their time with [Client's Name or your relationship with the provider], I have witnessed their dedication, compassion, and professionalism in delivering care.

[Describe specific qualities and experiences of the provider, including their skills, reliability, and any notable actions that demonstrate their capabilities.]

In conclusion, I strongly recommend [Provider's Name] for any position they seek within the IHSS program. They have consistently proven to be a valuable asset in providing quality care. Please feel free to contact me at [your phone number] or [your email] if you require further information.

Sincerely,

[Your Name]  
[Your Relationship to the Provider]