

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

Dear [Recipient Name],

I am writing to recommend [Client's Name] for therapy in addressing their experiences with Post-Traumatic Stress Disorder (PTSD). As [Client's relationship to you, e.g., their therapist, counselor, etc.] for [duration], I have witnessed [his/her/their] struggle with the symptoms of PTSD and the impact it has had on [his/her/their] daily life.

[Client's Name] has shown immense courage in confronting the challenges presented by [his/her/their] trauma history. [He/She/They] exhibit symptoms such as [briefly describe symptoms, e.g., flashbacks, anxiety, avoidance behavior], which have significantly affected [his/her/their] ability to [mention specific areas affected, e.g., work, relationships, daily activities].

In my professional opinion, it is essential for [Client's Name] to engage in specialized therapy to address [his/her/their] unique needs related to PTSD. [He/She/They] would benefit greatly from therapy focused on [specific therapeutic approaches, e.g., Cognitive Behavioral Therapy, EMDR], which can provide [him/her/them] with effective coping strategies and a supportive environment for healing.

I wholeheartedly support [Client's Name]'s journey towards recovery and believe that with the appropriate therapeutic intervention, [he/she/they] can achieve significant improvement in [his/her/their] quality of life.

If you have any questions or require further information, please feel free to contact me at [your phone number] or [your email address].

Thank you for considering this important recommendation.

Sincerely,

[Your Name]
[Your Title/Position]