

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

Dear [Recipient's Name],

I hope this letter finds you well. My name is [Your Name], and I am writing to request assistance regarding the PWD Scholarship Program. I am eager to pursue my education in [Your Field of Study] and believe that this scholarship would greatly support my academic journey.

I am a person with disabilities and currently face financial constraints that make it challenging to afford necessary expenses related to my education. I am committed to overcoming these obstacles and achieving my academic goals.

I kindly ask for your assistance in guiding me through the application process or providing any additional resources or information related to the PWD Scholarship Program.

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

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]