

Participant Lived Experience Statement

LETTER FORMAT

In regards to the (e.g. Plan Reassessment) of (name of participant)

Participant Lived Experience Statement

1. *(insert introduction)*
2. *(insert hardest thing for you about living with your disability)*
3. *(insert what you struggle with using one or more of the life areas)*
4. *(insert equipment used)*
5. *(insert who provides support to you and it's sustainability)*
6. *(insert impact on your relationships)*
7. *(insert funded supports you need)*
8. *(insert consequences of not getting funded support)*

Thank you for taking the time to understand my situation.

Yours sincerely

(signature)

(name and date)