

Confirmation of Academic Program Reaccreditation Meeting

Date: [Insert Date]

Dear [Recipient's Name],

We are pleased to confirm your attendance at the upcoming meeting regarding the reaccreditation of the [Program Name] program.

Meeting Details:

- Date: [Insert Date]
- Time: [Insert Time]
- Location: [Insert Location]
- Duration: [Insert Duration]

The agenda for the meeting will focus on the following:

- Review of Program Objectives
- Assessment of Student Outcomes
- Discussion of Continuous Improvement Plans

Please confirm your availability for the meeting by [Insert Confirmation Deadline]. If you have any questions or require further information, feel free to reach out.

We appreciate your commitment to maintaining the quality of our academic programs.

Sincerely,

[Your Name]

[Your Position]

[Institution Name]

[Contact Information]