Confirmation of Participation

[Your Contact Information]

| Date: [Insert Date] |
|---|
| Dear [Stakeholder's Name], |
| We are pleased to confirm your participation in the Knowledge Transfer Session scheduled for [Insert Date] at [Insert Time]. The session will take place at [Insert Location/Platform]. |
| During this session, we will cover the following topics: |
| [Topic 1] [Topic 2] [Topic 3] |
| Please let us know if you have any questions or require further information. |
| Thank you for your commitment to enhancing our collaborative efforts. We look forward to your valuable contributions during the session. |
| Best regards, |
| [Your Name] |
| [Your Position] |
| [Your Company] |