

Recommendation Request for Pharmaceutical Internship Application

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Recipient's Name]
[Recipient's Title/Position]
[Company/Institution Name]
[Company Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am reaching out to kindly request a letter of recommendation from you for my application to the pharmaceutical internship program at [Company/Institution Name]. As you know, I have been pursuing [Your Degree/Field of Study] at [Your University], and I believe that this internship would be a valuable opportunity for my professional growth.

Your guidance and support during [mention any relevant experience or course] have truly inspired me, and your perspective on my skills and work ethic would be extremely helpful as I apply for this position. The deadline for submission is [insert deadline], and I would be grateful if you could provide the recommendation by that date.

Thank you very much for considering my request. I appreciate your time and support, and I look forward to your positive response.

Sincerely,
[Your Name]