

Academic Withdrawal Confirmation

Date: [Insert Date]

To: [Student's Name]

Address: [Student's Address]

Dear [Student's Name],

We are writing to confirm the acceptance of your request for academic withdrawal from [Institution/Program Name] due to financial difficulties. Your decision, effective as of [Withdrawal Date], has been processed and noted in your academic record.

If you require any assistance regarding future enrollment or financial aid options, please do not hesitate to reach out to our financial aid office at [Contact Information].

We wish you the best in your future endeavors and hope to see you back at [Institution Name] when circumstances allow.

Sincerely,

[Your Name]

[Your Title]

[Institution/Organization Name]

[Contact Information]