

# Rehabilitation Program Completion Confirmation

Date: [Insert Date]

To Whom It May Concern,

This letter is to confirm that [Participant's Name], has successfully completed the rehabilitation program at [Facility Name] on [Completion Date].

[Participant's Name] has participated actively in the program and has shown significant progress in their recovery journey.

We commend their dedication and commitment throughout the program and wish them continued success in their future endeavors.

If you have any questions or require further information, please do not hesitate to contact us.

Sincerely,

[Your Name]

[Your Title]

[Facility Name]

[Contact Information]