

Confirmation of Extended Year Services

Date: [Insert Date]

[Your Name]

[Your Title]

[Your Organization]

[Your Address]

[City, State, Zip Code]

Email: [Your Email]

Phone: [Your Phone Number]

Dear [Recipient's Name],

We are pleased to confirm your enrollment in our extended year services program for the upcoming academic year. Our program aims to provide continued support and learning opportunities for students, ensuring a seamless transition into the new school year.

The details of the extended year services are as follows:

- **Program Start Date:** [Start Date]
- **Program End Date:** [End Date]
- **Location:** [Program Location]
- **Schedule:** [Days and Times]

If you have any questions or require further information, please do not hesitate to contact us at [Contact Information]. We look forward to an enriching experience for your child.

Thank you for your commitment to your child's education.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]