

Confirmation of Student Withdrawal Request

Date: [Insert Date]

To,

[Student's Name]
[Student's Address]
[City, State, Zip Code]

Dear [Student's Name],

This letter is to confirm the receipt of your withdrawal request from [Institution Name] as requested on [Request Date]. After reviewing your application, we acknowledge your decision to withdraw from the program.

Your official withdrawal date is recorded as [Withdrawal Date]. Please note that any outstanding balances or obligations to the institution must be settled by [Settlement Date] to complete the withdrawal process.

If you have any questions or require further assistance, feel free to contact our office at [Contact Information].

We wish you all the best in your future endeavors.

Sincerely,

[Your Name]
[Your Position]
[Institution Name]
[Contact Information]