

Experiential Learning Advising

Date: [Insert Date]

Dear [Recipient Name],

We are excited to invite you to participate in our upcoming professional development workshops designed to enhance your skills through experiential learning. These workshops will provide you with hands-on experience and the opportunity to apply theory to practice in a supportive environment.

Workshop Details:

- **Title:** [Workshop Title]
- **Date:** [Workshop Date]
- **Time:** [Workshop Time]
- **Location:** [Workshop Location]

Through these workshops, you will:

- Engage with industry professionals
- Collaborate with peers on real-world projects
- Build a professional network

To register, please complete the attached form and return it by [Registration Deadline]. If you have any questions, feel free to reach out to us at [Contact Information].

We look forward to your participation and believe that it will be a valuable experience for your professional growth.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]