

Academic Counseling Session Confirmation

Date: [Insert Date]

To: [Student's Name]

From: [Counselor's Name]

Subject: Confirmation of Academic Counseling Session

Dear [Student's Name],

This letter is to confirm your academic counseling session scheduled for [Insert Date and Time]. The meeting will take place at [Insert Location/Platform if virtual].

During this session, we will discuss your academic progress, explore potential areas for improvement, and review your goals for the upcoming semester. Please come prepared with any questions or topics you would like to discuss.

If you are unable to attend, please let me know in advance so that we can reschedule your session.

Looking forward to our conversation.

Sincerely,

[Counselor's Name]

[Counselor's Title]

[Contact Information]