Enrollment Confirmation

Date: [Insert Date]

Employee Name: [Insert Employee Name]

Department: [Insert Department]

Position: [Insert Position]

Dear [Employee Name],

We are pleased to confirm your enrollment in the Skill Enhancement Training Program scheduled to begin on [Start Date]. This program is designed to enhance your skills in [Specify Skills/Topics] and will take place at [Location/Venue] from [Start Time] to [End Time].

Details of the training are as follows:

- Training Program: [Name of the Program]
- **Duration:** [Duration]
- Facilitator: [Facilitator Name]
- Materials Provided: [Specify Materials]

Please ensure to complete any pre-training assignments by [Due Date]. If you have any questions or require further assistance, feel free to reach out to [Contact Person/Email].

We look forward to your active participation.

Best Regards,

[Your Name]

[Your Position]

[Company Name]

[Company Contact Information]