

# Conditional Admission Acceptance Letter

Date: [Insert Date]

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Your Email]  
[Your Phone Number]

[Recipient Name]  
[University/Institution Name]  
[Office of Admissions]  
[University Address]  
[City, State, Zip Code]

Dear [Recipient Name],

We are pleased to inform you that you have been granted conditional admission to [Program Name] at [University/Institution Name] for the [Term/Year]. Your admission is contingent upon the successful completion of the following requirements:

- [Requirement #1]
- [Requirement #2]
- [Requirement #3]

Please ensure that you meet these conditions by [Deadline Date]. Once the conditions are met, your admission status will be converted to full admission.

We look forward to welcoming you to our esteemed institution and supporting you as you embark on this exciting journey.

If you have any questions or need further assistance, please do not hesitate to contact us at [Contact Information].

Sincerely,

[Your Name]  
[Your Title]  
[University/Institution Name]  
[Contact Information]