

Dear Sir/ Director of Training at -----

Greetings,

Please kindly approve the training of the student -----

The student's details are as follows -

Enrolled class /------Department /----- Current academic year ------

Place of residence -----

Home phone number ------ Mobile phone number ------

This is on the understanding that the training is the personal responsibility of the student and without any obligation on the part of the college with regard to the rights of others.

With sincere thanks for your cooperation,

Yours sincerely

Training Department

Head of Department Director

Director of Administration

Dr. / Vice Dean for Education and Student Affairs