

## Letter of Acceptance

<Date>

TO WHOM IT MAY CONCERN:

This is to inform you and your institution that Mr./Ms.

\_\_\_\_\_ ,

On-the-job Training (OJT) Applicant is accepted to have his/her practicum on this company beginning \_\_\_\_\_ until \_\_\_\_\_ to complete the required number of OJT hours.

Name of Company: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company Number: \_\_\_\_\_

Certified true and correct,

\_\_\_\_\_

(Signature over printed name)

\_\_\_\_\_

(Position)

\_\_\_\_\_

(Date Signed)