Organization Letter Head

DATE

SUPERVISOR NAME
SUPERVISOR TITLE

ORGANIZATION NAME

ORGANIZATION ADDRESS

To Whom It May Concern,

STUDENT NAME has secured an internship (research assistantship) with ORGANIZATION NAME. SUPERVISOR NAME will be the supervisor. STUDENT NAME will intern from MM/DD/YYYY to MM/DD/YYYY. The internship (research assistantship) will be hybrid/in-person. ORGANIZATION NAME is based in CITY, COUNTRY.

SUPERVISOR NAME can be reached via email at SUPERVISOR EMAIL.

Sincerely,

SUPERVISOR NAME

SUPERVISOR TITLE