

Date: [Insert Date]

To: [Employee Name]

Position: [Employee Position]

Department: [Employee Department]

Dear [Employee Name],

We are pleased to inform you of your **conditional acceptance** into the **[Name of Training Program]** organized by [Company/Department Name]. Your application has been reviewed, and we believe you show great potential to benefit from and contribute to this initiative.

However, please note that your acceptance to the program is contingent upon fulfilling the following conditions:

- Completion of the prerequisite course(s): [List prerequisite courses]
- Submission of the required documentation: [Specify documents, e.g., certificates, forms]
- Passing the preliminary assessment/exam: [Specify assessment details, if applicable]
- Other conditions: [List any additional requirements, if any]

Kindly ensure that all conditions are fulfilled and necessary materials are submitted by **[Deadline Date]**. Failure to meet these requirements may result in the withdrawal of your tentative acceptance into the program.

If you have any questions regarding the conditions or need further clarification, please contact [Contact Person] at [Contact Information].

We commend your commitment to professional development and look forward to your successful participation in the training program pending completion of the above requirements.

Sincerely,

[Your Name]

[Your Title]

[Company/Organization Name]

[Contact Information]