

# Formal Acceptance Letter for Medical School Admission

[Your Name]  
[Your Street Address]  
[City, State, ZIP Code]  
[Email Address]  
[Phone Number]  
[Date]

[Admissions Office]  
[Medical School Name]  
[School Address]  
[City, State, ZIP Code]

Dear Admissions Committee,

I am writing to formally accept the offer of admission to [Medical School Name] for the incoming [Year] class. I wish to express my sincere gratitude for this opportunity, and I am honored to become part of such a distinguished program.

I acknowledge and accept all terms and conditions of my admission as outlined in the acceptance letter, and I am prepared to complete any required enrollment procedures and submit all necessary documentation by the specified deadlines.

Thank you once again for this opportunity. I look forward to joining [Medical School Name] and contributing to the academic and clinical community.

Please let me know if any further information or action is required on my part.

Sincerely,

[Your Name]