

[Date]

[Student Name]  
[Student ID Number]  
[Student Address]

**Subject: Notification of Six-Month Program Completion and Graduation**

Dear [Student Name],

Congratulations! We are pleased to formally notify you that you have successfully completed all the requirements for the [Name of Program].

This letter confirms your graduation from this six-month intensive program, which ran from [Start Date] to [End Date]. During this period, you have demonstrated the necessary skills, dedication, and academic rigor required to master the curriculum.

Your final records indicate that you have achieved a final grade of [Grade/Percentage] and have fulfilled all clinical/practical hour requirements.

Your official diploma/certificate is [enclosed with this letter / available for pickup at the Registrar's office / will be mailed to your primary address by Date].

We commend you on this significant achievement and wish you the very best in your professional endeavors. We are confident that the knowledge you have gained will serve you well in your career.

Sincerely,

[Signature]  
[Name of Program Director/Dean]  
[Name of Institution/Organization]