Logo of the laboratory/institution Laboratory/institution information:

Address

Phone

Email address

**Letter of acceptance**

This letter is to confirm that the Name of the Laboratory/Institution is accepting Name Surname as applicant to attend an EFLM LabX training program in period X-X 2024.

This letter of acceptance is valid for the EFLM bursary application.

Kind regards,

Place, date of issue

Signature and name of Head of the laboratory/institution