

Letterhead of Licensing Organization

(Address of organization)

Letter of Good Standing

This letter of good standing is written upon the request of (Name of participant) , who graduated from (Name of University) on (month/year) with (Bachelor/Master/Doctorate/etc) Degree in (field of study) .

He/She has been registered and licensed as (title) on (mm/dd/yyyy) by (registering organization) , and his/her registration number is (registration number) .

Since his/her registration, he/she has been working for (name of organization) . He/She has no reported medical legal records or malpractices while he/she has practiced his/her medical profession.

With best regards,

(Signature)

(Full name of signatory)

Seal of Organization

Or

Notarization