

DATE: <<Date>>

TO: Administration of Training and Scholarship Director of: King Abdulaziz Medical City in
Riyadh / Jeddah - National Guard
Head of: <<Department>>

SUBJECT: Internship Application for: <<Intern Name>>
University Name: <<University Name>>
National ID: <<National ID>>
Mobile Number: <<Mobile Number>>
Email Address: <<Email Address>>

Dear Doctor, In reference to the subject line, <<Intern Name>> currently a medical intern at the College of Medicine of <<University Name>>. The aforementioned intern would like to stay at your department as an intern for the month of <<Start Date>>, until <<End Date>>. Given this, I shall be grateful if you accept the intern for this period within your department and completing the evaluation form at the end of the rotation. Kindly send the acceptance / rejection letter and the intern's Evaluation to the Official university email and send a copy (CC) to the intern's Email.

Thank you and best wishes.

Sincerely yours,

<<Official Title and Signature>>
<<Official Email Address>>