

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

[Recipient's Name]
[Recipient's Title]
[Company/Organization Name]
[Company Address]
[City, State, Zip Code]

Subject: Consent Letter for Participation in EWOL

Dear [Recipient's Name],

I, [Your Name], hereby give my consent to participate in the EWOL program conducted by [Company/Organization Name]. I understand the purpose and activities involved in the program and agree to take part in all activities as outlined.

I acknowledge that my participation is voluntary and that I can withdraw at any time without penalty. I also understand that any information gathered during this program will be kept confidential and used only for the stated purposes.

Please feel free to contact me at [Your Phone Number] or [Your Email Address] if you require any further information.

Thank you for this opportunity.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Name]

[Your Title/Organization (if applicable)]