

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

[Recipient's Name]  
[Institution Name]  
[Institution Address]  
[City, State, Zip Code]

Subject: Parental Consent for PGDM Admission

Dear [Recipient's Name],

I, [Your Name], the parent/guardian of [Student's Name], who is applying for the Post Graduate Diploma in Management (PGDM) program at [Institution Name], hereby give my consent for my child to pursue this course.

I understand the program's requirements and commitments, and I fully support [Student's Name] in this endeavor.

Please feel free to contact me if further information is needed.

Thank you for your consideration.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Relationship to Student]