

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

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

Dear [Recipient's Name],

I am pleased to inform you that your application for the XDR (Extended Drug Release) program has been accepted. We were impressed by your credentials and experience, and we believe you will be an excellent addition to our team.

Please find enclosed the official documents outlining the next steps in the process, including timelines and requirements. You will also find information about the orientation session scheduled for [date].

Should you have any questions or require further information, please feel free to reach out to me at [your phone number] or [your email address].

Congratulations once again, and we look forward to working with you!

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]
[Your Title]
[Organization's Name]