

[University Letterhead/Logo]

[Date]

[Recipient Name/Organization]

[Recipient Address]

[City, State, Zip Code]

Subject: Verification of Postgraduate Educational Qualifications

To Whom It May Concern,

This letter serves to officially verify the postgraduate educational qualifications of the following individual:

- **Full Name:** [Student Full Name]
- **Date of Birth:** [Student Date of Birth]
- **Student ID Number:** [Student ID Number]

According to our official academic records, the above-named individual has successfully completed the requirements for the following degree:

- **Degree Awarded:** [e.g., Master of Science, PhD]
- **Major/Field of Study:** [Subject Area]
- **Date of Graduation/Conferral:** [Date]
- **Academic Honors:** [If applicable, e.g., Distinction/Cum Laude]

This degree was awarded by [University Name], which is a fully accredited institution of higher learning. The language of instruction for this program was [Language].

If you require further information or a copy of the official transcript, please contact the Registrar's Office at [Phone Number] or [Email Address].

Sincerely,

[Signature]

[Name of University Official]

[Title/Position]

[Department Name]

[University Name]

[Official University Seal/Stamp]