**[Name of the Institution]**  
[Institution Address]  
[Postal Code and City]  
[Phone Number]  
[Email Address]

**Date:** [e.g., May 15, 2025]

**SUBJECT:** *Permission to Participate in the Project*

Dear Sir/Madam,

This is to confirm that [full name of the employee], employed at [name of the institution] as a [job title], has my permission to participate in the project titled *[project name]*, which will take place from [start date] to [end date], organized by [name of the organizing institution].

We consider the employee’s participation in the project a valuable scientific contribution and an opportunity for further professional development, in line with the mission and scope of our institution.

Sincerely,

**[Full name of the Head of Institution]**  
[Position]  
[Signature]  
[Institution Stamp]