



THE COMPANY
1 Main Street
Company Town, NJ 00000

Subject: Proof of Internship

To whom it may concern:

This letter serves as proof of internship for [Intern's Full Name].

Internship Start Date: [Start Date]

Internship End Date: [End Date]

Department/Division: [Department/Division Name]

Internship Position/Title: [Internship Title]

Supervisor's Name: [Supervisor's Full Name]

Company's Contact Information: [Company Address, Phone Number, Email]

We trust that this information will serve as proof of internship at [Company Name]. This letter is issued on official company letterhead to authenticate the details provided.

Sincerely,

[Supervisor's Full Name]

[Supervisor's Job Title]

[Company Name]