*USE OFFICIAL Hospital/University Letterhead*

(INSERT CITY, DATE)

Dear Sir / Madam,

Since *(INSERT DD/MM/YYYY),* *(INSERT TITLE, FIRST NAME & SURNAME) (BsC/MD/PhD)* started as *(INSERT JOB TITLE)* in our Department of *(INSERT DEPARTMENT NAME i.e. Pediatric Oncology and Hematology.*

For the 49th Congress of the International Society of the Paediatric Society of Oncology (SIOP 2017) held in Washington DC, USA, October 12 - 15, 2017 , I hereby confirm that he/she is not receiving funding from elsewhere.

The work described in the abstract titled *(INSERT ABSTRACT TITLE)* was submitted to be presented at the SIOP 2016 Congress and has the abstract number (INSERT ABSTRACT NUMBER i.e. SIOP – 0000)

(Applicable to Young Investigator Awards only)

The work described in this abstract is original research and has not been presented elsewhere.

We hope this information is sufficient enough to support the application of *(INSERT TITLE, FIRST NAME & SURNAME)* for the (SIOP Scholarship and/or Young Investigator Award /Scholarship for the above mentioned meeting.

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| Sincerely,(SIGNATURE)Head of Research Dept of Pediatric Oncology/ Hematology  |  |