

Department Name  
Organization Name  
Address Line 1  
Address Line 2

Date: \_\_\_\_\_

To,  
[Employee Name]  
[Current Department/Designation]  
[Employee ID]

**Subject: Departmental Transfer Approval Letter**

Dear [Employee Name],

This is to inform you that your request for transfer from **[Current Department]** to **[New Department]** has been approved, effective from **[Effective Date]**.

You are required to report to **[New Department Supervisor Name]** on the above-mentioned date. All responsibilities and duties pertaining to your new assignment will be communicated to you accordingly.

Kindly complete all formalities with your current department before the transfer date.

We wish you all the best in your new role.

**[Approving Authority Name]**

[Designation]

[Department]