

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[State Nurse Aide Registry Name]
[Registry Address]
[City, State, Zip Code]

Dear [Registry Administrator's Name or "To Whom It May Concern"],
I hope this letter finds you well. I am writing to formally request the renewal of my Certified Nursing Assistant (CNA) license, which is due to expire on [Expiration Date]. My license number is [License Number].
I have completed the required continuing education hours and attached the relevant documentation for your review. Additionally, I have included a copy of my current certification and any other required forms.
Please let me know if there are any other documents or fees required to process my license renewal. I appreciate your assistance and look forward to your prompt response.

Thank you for your attention to this matter.

Sincerely,

[Your Name]
[Your CNA License Number]
[Your Signature (if sending a hard copy)]