

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

[Recipient Name/Organization]
[Recipient Address]
[City, State, Zip Code]

Subject: Request for CNA Licensure Verification

Dear [Recipient Name/Organization],

I hope this letter finds you well. I am writing to request verification of my Certified Nursing Assistant (CNA) license. Below are my details for your reference:

- Full Name: [Your Full Name]
- Date of Birth: [Your DOB]
- License Number: [Your License Number]
- State of Licensure: [Licensing State]

I am in the process of [explain purpose, e.g., applying for a new job, transferring licensure, etc.], and I kindly request that you provide verification of my CNA licensure status.

Please send the verification to the following address or email:

[Your Address or Email]

Thank you for your assistance in this matter. If you require any further information, please do not hesitate to contact me.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]