

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

Dear [Board Contact Person or Title],

I hope this letter finds you well. I am writing to request the renewal of my Certified Nursing Assistant (CNA) license, which is set to expire on [expiration date]. My license number is [license number].

I have completed the required continuing education hours and have attached proof of completion along with my renewal application and payment. Please let me know if any additional information or documentation is needed.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]
[Your CNA License Number]