

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Recipient Name]  
[Recipient Title/Department]  
[State Board of Nursing/Relevant Authority Name]  
[Office Address]  
[City, State, Zip Code]

Dear [Recipient Name],

Subject: CNA License Renewal Application

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

As required, I have completed the necessary continuing education courses and have attached copies of the completion certificates for your review. Additionally, I have included the completed renewal application form and the applicable fee of [amount] as outlined on your website.

I appreciate your attention to my renewal request, and I look forward to continuing my commitment to providing quality care to patients. Please let me know if you require any further information or documentation.

Thank you for your time.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]