

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Your Email]
[Your Phone Number]
[Date]
[Recipient's Name]
[Title]
[Institution/Organization Name]
[Address]
[City, State, ZIP Code]

Dear [Recipient's Name],

I am writing to express my interest in the Licensed Practical Nurse (LPN) program at [Institution/Organization Name]. With a strong passion for nursing and a commitment to providing exceptional patient care, I believe this program will equip me with the skills and knowledge necessary to excel in the field.

I completed my [relevant education, e.g., high school diploma or equivalent], and have spent time [mention any relevant experience, e.g., working as a nursing assistant, volunteering in healthcare settings, etc.]. This experience has reinforced my desire to pursue a career in nursing and has provided me with valuable insights into patient care and the healthcare environment.

I am particularly drawn to [mention any specific aspect of the program or institution that appeals to you, e.g., hands-on training, experienced faculty, etc.]. I am eager to learn and grow in my nursing career, and I am confident that the LPN program at [Institution/Organization Name] will help me achieve my professional goals.

Thank you for considering my application. I look forward to the opportunity to contribute to your program and to discuss how I can be a valuable candidate for the LPN program.

Sincerely,
[Your Name]