

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

[Recipient's Name]
[Institution's Name]
[Institution's Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to express my gratitude for being accepted into the Licensed Practical Nurse (LPN) program at [Institution's Name] for the [specific term/year]. I am excited about this opportunity to further my education and pursue my passion for nursing.

I understand the commitment required for this program and assure you of my dedication to both my studies and the values upheld by [Institution's Name]. I am looking forward to engaging with the faculty, participating in hands-on clinical experiences, and collaborating with fellow students to gain the knowledge and skills necessary to excel in this field.

Please find enclosed any necessary documents and forms as required for enrollment. If there are additional steps I need to complete prior to the start of the program, do not hesitate to inform me.

Thank you once again for this incredible opportunity. I look forward to starting this journey at [Institution's Name] and contributing positively to the nursing community.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]