

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

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

Dear [Recipient's Name],

I am writing to recommend [Applicant's Name] for admission to the LPN program at [Institution's Name]. I have had the pleasure of knowing [Applicant's Name] for [duration] in my capacity as [Your Position/Relationship to Applicant].

During this time, I have been consistently impressed by [his/her/their] dedication, professionalism, and passion for nursing. [He/She/They] possess exceptional qualities that make [him/her/them] an ideal candidate for your program, including [mention specific skills, experiences, or attributes].

One of the most remarkable moments I witnessed was when [provide a specific example or story that highlights the applicant's abilities or character]. This exemplifies [Applicant's Name]'s commitment to providing compassionate and quality care to others.

In addition to [his/her/their] clinical skills, [Applicant's Name] has demonstrated outstanding leadership and teamwork. [Provide another example or detail that showcases these qualities].

I wholeheartedly support [Applicant's Name]'s application to your LPN program and have no doubt that [he/she/they] will excel in both the academic and clinical components. I am confident that [he/she/they] will be a valuable addition to your cohort.

Thank you for considering this recommendation. Please feel free to contact me at [Your Phone Number] or [Your Email] if you require any further information.

Sincerely,

[Your Name]  
[Your Title/Position]