

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

Dear [Recipient's Name],

I am writing to formally request the issuance of my Licensed Practical Nurse (LPN) license. I have completed all necessary requirements, including [list any relevant training, education, examinations, etc.], and I am eager to begin my nursing career.

Enclosed with this letter are copies of my [list any attached documents, such as transcripts, exam results, application form, etc.] for your review and processing.

Thank you for your attention to this matter. I look forward to your prompt response and the opportunity to obtain my LPN license.

Sincerely,
[Your Name]