

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

Dear [Recipient's Name],

I am writing to express my interest in obtaining my Licensed Practical Nurse (LPN) license and to highlight my qualifications and passion for nursing. With a strong foundation in patient care and a commitment to providing high-quality health services, I am eager to further my career in the nursing field.

I completed my LPN program at [School Name] in [Year], where I gained essential skills in patient assessment, medication administration, and wound care. My clinical rotations at [Facility Name] have equipped me with hands-on experience in a variety of settings, allowing me to develop effective communication and critical thinking skills while working with diverse patient populations.

I am particularly drawn to [specific aspects of nursing or particular areas of interest], and I believe that my dedication to compassionate care and teamwork aligns perfectly with the values of

[Company/Organization Name]. I am confident that obtaining my LPN license will enable me to contribute positively to the healthcare team and provide exceptional support to patients and their families.

Thank you for considering my application for the LPN license. I look forward to the opportunity to discuss my qualifications further and to demonstrate my commitment to excellence in nursing.

Sincerely,  
[Your Name]