

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Admissions Committee]  
[Pharmacy School Name]  
[School Address]  
[City, State, Zip Code]

Dear Members of the Admissions Committee,

I am writing to express my intent to apply for the Doctor of Pharmacy program at [Pharmacy School Name]. My passion for pharmacy has been shaped by my academic experiences, work in the healthcare field, and a profound desire to make a difference in patient care.

Having completed my undergraduate studies in [Your Major] at [Your University], I have developed a solid foundation in the sciences. My coursework in [relevant courses] has not only heightened my interest in pharmacology but has also equipped me with the knowledge necessary for success in the pharmacy profession.

Furthermore, my experience as a [Position Title] at [Workplace/Internship] allowed me to interact directly with patients and healthcare professionals, underscoring the vital role pharmacists play in healthcare. I was involved in [describe relevant responsibilities and what you learned], which solidified my commitment to pursuing a career in pharmacy.

I am particularly drawn to [Pharmacy School Name] because of [specific programs, faculty, or values that resonate with you]. I believe that the innovative curriculum and collaborative environment will help me develop the skills I need to become a competent and compassionate pharmacist.

I am excited about the possibility of contributing to the [Pharmacy School Name] community and learning from your distinguished faculty. I am fully committed to excelling in your program and making a positive impact within the healthcare community.

Thank you for considering my application. I look forward to the opportunity to further discuss my passion for pharmacy and how I can contribute to the esteemed community at [Pharmacy School Name].

Sincerely,  
[Your Name]