

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

Dear [Recipient's Name],

I am writing to formally resign from the NNP program, effective [last day of participation, typically two weeks from the date above].

This decision was not easy to make, but after careful consideration, I believe it is in my best interest to pursue other opportunities at this time. I am grateful for the invaluable experiences and education I have received during my time in the program.

I appreciate all the support from faculty, staff, and my fellow participants. I will do my utmost to ensure a smooth transition during my remaining time. Please let me know how I can assist in this process.

Thank you once again for the opportunity to be part of the NNP program. I wish continued success for the program and my colleagues moving forward.

Sincerely,

[Your Name]