**NURSING LETTER OF INTENT**

[MM/DD/YYYY]

[SENDER NAME]

[SENDER STREET ADDRESS]

[SENDER CITY, STATE, ZIP]

[RECIPIENT NAME], [RECIPIENT TITLE]

[INSTITUTION NAME]

[INSTITUTION STREET ADDRESS]

[INSTITUTION CITY, STATE, ZIP]

Dear [RECIPIENT NAME],

​​[INTRODUCE APPLICANT & EXPLAIN INTEREST IN NURSING AND INSTITUTION].

[DESCRIBE QUALITIES/EXPERIENCES BENEFICIAL FOR SCHOOL/NURSING].

[RESTATE IMPORTANCE OF NURSING TO APPLICANT AND CONVEY GRATITUDE].

Sincerely,

[\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](http://esign.com/)

[Signature]

[APPLICANT PRINTED NAME]

[Print Name]