

This is a sample letter. Must be on school letterhead  
& must be sent directly to Arizona State Board of  
Nursing

DATE

Arizona State Board of Nursing  
Attention: AP Licensing Tech  
1740 West Adams Street Suite 2000  
Phoenix, Arizona 85007

To Whom It May Concern:

\_\_\_\_\_ has completed the course work, including the  
Name of Student

required number of clinical hours, as a \_\_\_\_\_ nurse practitioner and  
Population focus

received the \_\_\_\_\_ degree with a major in \_\_\_\_\_  
Type of degree

on \_\_\_\_\_. The length of the program was \_\_\_\_\_.  
Date