

Professional Licensing Renewal Request

Date: [Insert Date]

[Your Name]
[Your Address]
[City, State, Zip]
[Your Email]
[Your Phone Number]

To: [Association Name]
[Association Address]
[City, State, Zip]

Dear [Association Board/Committee Name],

I am writing to formally request the renewal of my professional license as a member of [Association Name]. My membership ID is [Membership ID], and my current license is set to expire on [Expiration Date].

Throughout my tenure as a member, I have continuously sought to uphold the standards and ethics of our profession. I have completed all required continuing education credits and attached the necessary documentation for your review.

Please find enclosed the renewal application form and payment of the renewal fee of [Amount]. I kindly ask for your prompt attention to this matter to ensure that there is no lapse in my licensing status.

Thank you for your time and consideration. I look forward to your positive response.

Sincerely,

[Your Name]
[Your Title/Position, if applicable]