

Nutritionist License Renewal Appeal

Date: [Insert Date]

To: [Licensing Board Name]

Address: [Licensing Board Address]

Dear [Board Member's Name],

I am writing to formally appeal the decision regarding the renewal of my nutritionist license, which was [denied/suspended] on [date of decision]. I understand the reasons provided; however, I would like to present additional information that may impact your reconsideration.

As a dedicated nutritionist with [number] years of experience, my commitment to promoting healthy lifestyles has never wavered. Throughout my career, I have worked diligently to support my clients and the community by [briefly describe relevant experience or contributions].

In response to the concerns raised, I have taken steps to [describe any corrective actions taken, further education completed, etc.]. I believe these efforts demonstrate my commitment to adhering to the highest professional standards.

I respectfully request the opportunity to review my case in light of this new information. My goal is to continue serving the public and providing essential nutrition services.

Thank you for considering my appeal. I look forward to your response and hope for a favorable resolution.

Sincerely,

[Your Name]

[Your Contact Information]

[Your License Number]