

Letter of License Renewal Request

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To Whom It May Concern,

I am writing to formally request the renewal of my nutritionist license, which is set to expire on [Insert Expiration Date]. My license number is [Insert License Number].

As a dedicated nutritionist, I have continually strived to uphold the standards of our profession and provide quality care to my clients. Over the past years, I have completed [insert number] continuing education hours in nutrition-related topics to maintain my knowledge and skills.

Please find enclosed the necessary documentation for the renewal process, including:

- Completed renewal application form
- Proof of continuing education hours
- Payment for the renewal fee

I appreciate your attention to this matter and look forward to your prompt response. If you require any further information, please do not hesitate to contact me.

Thank you for your time and consideration.

Sincerely,

[Your Name]