

Affirmation of Educator Licensure

Date: [Insert Date]

To Whom It May Concern,

I, [Your Name], am writing to affirm my intent to pursue educator licensure in the state of [State]. I have completed all necessary educational requirements and have participated in all mandated training programs.

My qualifications include:

- [Degree Obtained, Institution, Year]
- [Relevant Coursework or Training]
- [Teaching Experience or Internships]

I am committed to providing high-quality education and fostering a positive learning environment for all students. I believe that my skills and dedication make me an ideal candidate for licensure.

Thank you for considering my affirmation for educator licensure. Please feel free to contact me for any further information.

Sincerely,

[Your Name]

[Your Address]

[Your Email Address]

[Your Phone Number]