

SAMPLE Program Completion Letter – RN

[INSERT LETTERHEAD OF THE NURSING EDUCATION PROGRAM]

CERTIFICATION OF REGISTERED NURSE (RN) EDUCATION PROGRAM COMPLETION

Student
Full Name

Last

First

Middle

Student Date of Birth _____

Education
Program Name _____

Date of Completion of
Education Program
Requirements _____

Degree awarded to qualify for licensure _____

I certify the above name student has successfully completed the requirements of the pre-licensure RN education program.

Signature

Name (Printed)

Title

Date Signed