

# Sample Attestation Letter

Please ensure:

- The letter is written on school letterhead
- Emailed as an uneditable attachment to [transcriptbyexam@dhp.virginia.gov](mailto:transcriptbyexam@dhp.virginia.gov)
- Subject line of email includes: Attestation Letter – School Name and Program Code

Date

To Whom It May Concern:

As (program representative), I am attesting that all students listed on this letter have completed the requirements of the registered nursing/practical nursing education program at (Name of Program, city/town/county, program code number) including that they have completed the curriculum and clinical requirements and hours throughout the lifecycle in a variety of settings (per regulation 18VAC 90-27-90 and 18VAC 90-27-100).

Student Name	Last 4 of SSN	DOB	Enrollment Date	Graduation/Conferral Date	Type of Degree Earned	Type of Nursing Education Program
Jane Smith	####	MMDDYYYY	MMDDYYYY	MMDDYYYY	ADN BSN Diploma	RN or PN