*Please copy and paste following letter on to official letterhead OR into an email that includes the official signature block of a college or university representative.*

**Today’s Date**

This letter is to certify that **Scholar First and Last Name** has been admitted into the BSN/RN program at **Current Institution**.

The CIP code for this program is: **CIP Code**

The student was officially accepted into the program on: **Date of Acceptance to Program**

**Name of Signatory**

**Job Title of Signatory**

**Email Address of Signatory**