

Date: [Insert Date]

Applicant Name: [Insert Applicant Name]

Address: [Insert Applicant Address]

Dear [Applicant Name],

Thank you for your interest in the [Name of Nursing School/Program] and for submitting your application for the [Year/Term] admission cycle.

After careful review of your application and supporting materials, we regret to inform you that you do not currently meet the eligibility criteria required for admission to our nursing program for this cycle. Each application is assessed thoroughly and decisions are based on a comprehensive evaluation of all eligibility requirements and the pool of candidates.

We recognize your commitment to pursuing a career in nursing and encourage you to review the specific requirements and guidelines for our program. If you are able to fulfill these criteria in the future, we strongly encourage you to reapply in subsequent admission cycles.

In the meantime, you may wish to use this time to strengthen your qualifications, such as by completing any outstanding prerequisites, gaining additional healthcare experience, or improving academic performance. Our admissions team is available to provide guidance should you have questions about eligibility or how to enhance your application for future consideration.

Thank you again for your interest in [Name of Nursing School/Program]. We wish you the very best in your academic and professional endeavors, and we hope to receive your application in a future cycle.

Sincerely,

[Admissions Officer's Name]

[Title/Position]

[Name of Nursing School/Program]

[Contact Information]