

Faculty Clinical Reference

Dear Nursing School Faculty Member:

I am submitting an application for Summer Student Nurse Externship Program at Union Hospital, Inc. Terre Haute, Indiana.

Will you please complete the evaluation on the reverse side and mail to or fax to Health Care Recruiter, Union Hospital, Inc 1606 North Seventh Street, Terre Haute, Indiana 47804, Fax 812-238-4528. I must have my applications to Union Hospital by March 31, 2010.

Thank you for your assistance.

Name of Nursing Student (please print)

Name of School