

Montreal General Hospital.

TRAINING SCHOOL FOR NURSES.

FORM OF APPLICATION.

1. Candidate's name in full and address
2. Are you a single woman or a widow?
3. Present occupation or employment.
Note. — Do not say "Living at home"
4. Place and date of birth
5. Height and weight
6. Where educated?
7. Are you strong and healthy, and have you always been so?
8. Are your sight and hearing perfect?
9. Do you ever wear glasses? If so, for what reason?
10. Have you any tendency to pulmonary complaints?
11. Have you any physical defects?
12. If a widow, have you children? How many?
How old? How are they provided for?
13. Where (if any) was your last situation?
-How long were you in it?

14. Names in full and addresses of two persons to be referred to. State how long each has known you. If previously employed, one of these must be the last employer.

Name	
Address	
Has known me	years.
Name	
Address	
Has known me	years.

15. Have you ever been in any Training School?
If so, where?
16. Have you read and do you clearly understand the regulations?

I declare the above statement to be correct.

Date

Signed