



Nurse Internship/Externship *Application*

**The Most
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Healing™**

*The Most
Dedicated
People*

Program Application *(please check one)*

Nurse Externship Nurse Internship

Name: _____

Address: _____

City/State/Zip: _____

Home Phone Number: _____ Cell Number: _____

E-mail: _____ Social Security Number: _____

Please check all that are applicable and provide the requested information:

Currently employed with INTEGRIS *Health*:

Title: _____ Employee I.D: _____

Campus, Department Name and Mailbox: _____

Department Supervisor/Manager: _____

Department Telephone Number: _____

Not currently employed by INTEGRIS *Health*:

Current Employer: _____ Position: _____

If you are not currently employed with INTEGRIS *Health*, are you related to an INTEGRIS *Health* employee?

No Yes

If YES, state employee name and relationship to you: _____

Enrolled currently as a student

College Name: _____

Credit Hours Complete: _____

Current Cumulative GPA: _____

Expected Graduation Date: _____

Semesters of Clinical Coursework Completed:

Fundamentals

Medical/Surgical

Other

Top Three Areas of Interest

1 _____

2 _____

3 _____

PLEASE ATTACH COPY OF OFFICIAL TRANSCRIPTS TO THIS APPLICATION.

Mail Intern Applications to:
INTEGRIS *Health*
ATTN: Nurse Recruitment
3400 NW Expressway
Bldg C, Suite 100
Oklahoma City, OK 73112

Mail Extern Applications to:
INTEGRIS *Health*
Nurse Extern Coordinator-NEAR
3400 NW Expressway
Bldg C, Suite 100
Oklahoma City, OK 73112

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Personal Reference Form

Please submit a total of three (3) references

My acquaintance with (name of applicant _____) has been as

- Employer Supervisor/Manager/Director
- Instructor/Teacher
- School Advisor

How long have you known this applicant? _____

Applicant rating: Check the column of the term that is most applicable:

	Outstanding	Above Average	Average	Below Average	Do Not Know
Clinical Skill and Ability					
Judgment and Common Sense					
Compassion and Concern for Others					
Teamwork					
Initiative					
Critical Thinking					
Sense of Commitment and Responsibility					
Interpersonal Skills					

What qualities or characteristics does the applicant have that you believe would contribute to his/her success as a Nurse Intern/Extern? _____

What qualities or characteristics does the applicant have that you believe might interfere with his or her success as a Nurse Intern/Extern? _____

INTEGRIS Director/Supervisors: As the applicant's Director/Supervisor, I declare that he or she is currently in good standing and has not had any disciplinary action within the last 12 months at INTEGRIS Health.

Signature: _____ Title: _____

Date: _____ Daytime Phone Number: _____