



## Nursing Tuition Assistance Application

Return the application and required documents to Tri Valley Health System Attention: Human Resources PO Box 488, Cambridge, NE 69022 or email to [hr@trivalleyhealth.com](mailto:hr@trivalleyhealth.com). Application deadline is May 1. Applicants will be scheduled for an interview. Approved applicants will be required to complete the tuition assistance agreement and a Tri Valley Health System employment application.

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

CURRENT TVHS EMPLOYEE: YES ☐ NO ☐

CURRENT CERTIFIED NURSING ASSISTANT: YES ☐ NO ☐

HIGH SCHOOL \_\_\_\_\_ YEAR GRADUATED \_\_\_\_\_

COLLEGE YEARS COMPLETED (Circle) 1 YEAR 2 YEARS 3 YEARS

THE FOLLOWING DOCUMENTATION MUST BE ATTACHED.  
**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**

- RESUME ☐
- HIGH SCHOOL TRANSCRIPTS ☐
- COLLEGE TRANSCRIPTS ☐
- RECOMMENDATION FROM TWO INSTRUCTORS ☐
- WHY I WANT TO BE A NURSE – 500 WORD ESSAY ☐

NAME \_\_\_\_\_

DATE \_\_\_\_\_