

# Join a Nurse Residency Program that Cares.



## Graduate Nurse Residency Program Application



### Who is eligible to apply:

- Nursing students who are seniors in a BSN or ADN program

### Acceptance into the program will be based on the following:

- Completed application
- Resume & cover letter
- Two (2) letters of recommendation from faculty/clinical instructors
- A copy of your transcript
- Completed online job application (<https://pm.healthcaresource.com/cs/Holyokehealth#/search>)
- Interview with hiring team

### Timeline:

Applications will be accepted on a rolling basis until all spaces are filled. Offers will be extended within two days of receiving completed application components and interview. Students selected to this program will be required to work full time (a minimum of 36 hours per week).

Application materials may be submitted by email to [Welsh\\_Anne@holyokehealth.com](mailto:Welsh_Anne@holyokehealth.com) or by mail to:

Valley Health Systems, Inc.  
Human Resources Department  
22 Hospital Drive  
Holyoke, MA 01040

**For questions related to the Graduate Nurse Residency Program please call the Valley Health Systems, Inc. Human Resources Department at 413.534.2547 or email [hrrsupport@holyokehealth.com](mailto:hrrsupport@holyokehealth.com).**





## GRADUATE NURSE RESIDENCY PROGRAM APPLICATION

### Applicant Information

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Eligibility

- I am a graduating student in a BSN program
- I am a graduating student in an ADN program
- I am in the Student Tech program graduating with a BSN
- I am in the Student Tech program graduating with a 2 year degree

### Education

College/University You Currently Attend:

Grade Point Average (provide academic transcript):

Nursing Area of Interest: Check one

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Intermediate Care (Step Down) | <input type="checkbox"/> Critical Care     |
| <input type="checkbox"/> Medical Surgical     | <input type="checkbox"/> Surgical                      | <input type="checkbox"/> Behavioral Health |

Shift Interest: Check one

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Days (7a - 3:30p)    | <input type="checkbox"/> Evenings (3p - 11:30p)  | <input type="checkbox"/> Nights (11p - 7:30a) |
| <input type="checkbox"/> 12 hr. Days (7a- 7p) | <input type="checkbox"/> 12 hr. Nights (7p - 7a) |   |

Academic Awards, Honors, and Achievements:

Current Employment and Title:

Employment Status/Hours worked per week:

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