

# NURSING AGREEMENT

AGREEMENT made this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by and between:

APPLICANT \_\_\_\_\_ of \_\_\_\_\_

&

PARENT/GUARDIAN \_\_\_\_\_ of \_\_\_\_\_

&

**THE TRUSTEES OF THE SMITH CHARITIES** of **51 Main Street, Northampton, MA 01060**

WHEREAS the parent, with the consent of the applicant, who is \_\_\_\_ years of age, does hereby agree that the applicant shall enter or has entered the \_\_\_\_\_ (Full name of school) at \_\_\_\_\_ for the **Study of Nursing** and for the purpose of completing the course of study required for a diploma as evidence of the applicant's eligibility to take the examination given by the Commonwealth of Massachusetts for a certificate as a Registered Nurse or as a Licensed Practical Nurse.

In consideration of the applicant's compliance with the above agreement and with the rules and regulations prescribed by The Trustees of the Smith Charities, and upon graduation and receipt of a diploma from the school written above, the applicant shall be entitled to the benefits provided by the last Will and Testament of the late Oliver Smith, Esq., in relation to the Nurse's program, as authorized by the decree of the Probate Court of the County of Hampshire, Massachusetts dated May 24, 1957.

And it is further agreed that if the applicant at any time before graduation and receipt of a diploma leaves the school, this agreement shall be terminated by The Trustees of the Smith Charities without further notice.

And the applicant hereby consents, to, and promises to comply with, the terms of this agreement.

IN WITNESS WHEREOF, the applicant and the parent have signed, and The Trustees of The Smith Charities has affixed its corporate seal and has signed, in its name and behalf, by Carla M. Kone, its Treasurer who is duly authorized, on the date written above, and IN THE PRESENCE OF

\_\_\_\_\_  
WITNESS Signature

\_\_\_\_\_  
APPLICANT Signature

\_\_\_\_\_  
WITNESS Signature

\_\_\_\_\_  
PARENT/GUARDIAN Signature

\_\_\_\_\_  
WITNESS Signature

\_\_\_\_\_  
THE TRUSTEES OF THE SMITH CHARITIES Signature

**APPLICANT NOTE:** Please return this signed and witnessed agreement along with the application to The Trustees of The Smith Charities, 51 Main Street, Northampton, MA 01060. If you have any questions, please contact Smith Charities at 413-584-0415 between the hours of 9:00 a.m. and 3:00 p.m., Monday through Friday.