



St John's Riverside Hospital  
Cochran School of Nursing  
Medical Library  
Telephone: (914)-964-4281

**Student Library Membership Application**

Date -----

Name: \_\_\_\_\_

Telephone: Home# \_\_\_\_\_

Cell Phone# \_\_\_\_\_ Office/Work# \_\_\_\_\_

Cochran School Email: \_\_\_\_\_

Private Email: \_\_\_\_\_

Expected date of graduation: \_\_\_\_\_

**Please check one**

CSN Student \_\_\_\_\_

CSN Alumni \_\_\_\_\_

12/5/2017