Form 300-A (Revised May 1944)
FEDERAL SECURITY AGENCY
U. S. PUBLIC HEALTH SERVICE
DIVISION OF NURSE EDUCATION

Budget Bureau
No. 68-R145.1.
Approval expires
8-31-45

SERIAL № 135250

UNITED STATES CADET NURSE CORPS
MEMBERSHIP CARD A

Name of Cadet:
Spruill Bonnie J.
(Last) (First) (Middle initial)

Spruill, Bonnie Jeane
(Signature of cadet)

Cadet's home address:
R. F. D. 2
(Number and street, or R. F. D.)
Bowdon Georgia
(City) (County) (State)

Cadet's age on date of admission to Corps 18

Date of birth Nov. 1, 1926

Dates of admission to school: (Fill in all that apply)
(1) Originally 06 11 5065 18 127
(2) By readmission
(3) By transfer from another school

Date of admission to Corps June 11 1945

Date of prospective beginning of Senior Cadet period

Date of issuance of Form 300, Certificate of Membership 11-24-45

(Signature of Director of School of Nursing)

Do not write below this line (this space is for central office use).

Termination by— *Date*

Graduation

Withdrawal (a) (b) 2-30-46

GPO 16—30005-1

School of Nursing Emory Univ. Hosp. Emory Univ. 10

State Georgia