



STATE OF TENNESSEE
DEPARTMENT OF HEALTH
BUREAU OF HEALTH LICENSURE AND REGULATION
DIVISION OF HEALTH CARE FACILITIES
227 French Landing, Suite 501
Heritage Place, Metrocenter
NASHVILLE, TENNESSEE 37243
TELEPHONE (615) 532-5171 or (800) 778-4504
FAX (615) 248-3601

PROCEDURES FOR PLACEMENT ON THE TENNESSEE NURSE AIDE REGISTRY

Attached is a form for verification of out-of-state nurse aide registration. Please read the directions completely prior to completing this form. We cannot process this form if it is incomplete, illegible, or includes false statements.

Please complete Part I of this form and attach a copy of your social security card and a copy of photo identification (driver's license, passport, or other photo identification in the area indicated on Part II.

Mail the form to the state in which you are registered. ** That state must complete PART II and mail the form to the Tennessee Nurse Aide Registry.

****EXCEPTION TO THE ABOVE STATED INSTRUCTIONS:** If you are on the California, Colorado, Illinois or Missouri Nurse Aide Registry, complete Part I, attach a copy of your social security card and photo identification; return the entire application to the Tennessee Nurse Aid Registry at the address listed above. Individuals certified in Alabama, Georgia, and Illinois may be eligible to challenge the Tennessee Nurse Aide Competency Evaluation (state test). Individuals certified in North Carolina must complete a Tennessee Nurse Aide Training Program and pass the Tennessee Competency Evaluation (train and test).

Notification of placement will be mailed to the address given on Part I of the verification form. Please provide the address where you will be living 45 days from the date you submit the application.

Your name will be placed on the registry if you are qualified when the following is complete.

- Your application is received from the state where you are currently registered,
- The state nurse aide registry verifies you are eligible for placement on the registry, and
- All other pertinent information is verified as true and correct.

Nurse aide directories and registries for other states are listed on the following page.

ALABAMA

Alabama Nurse Aide Registry
P.O. Box 30317
Montgomery, AL 36130-3017
334-206-5169

ALASKA

Nurse Aide Registry
Department of Commerce, Community,
and Economic Development
550 West 7th Ave, Suite 1500
Anchorage, AK 99501
907-269-8196

ARIZONA

Arizona State Board of Nursing
4747 N. 7th St., Suite 200
Phoenix, AZ 85014-3653
602-889-5150

ARKANSAS

Office of Long Term Care
P.O. Box 8059
Slot Number S405
Little Rock, AR 72203-8059
501-682-8484 or 501-682-1807

CALIFORNIA

Department of Health Services/CNA
ATCS-MS 3301
P.O. Box 997416
Sacramento, CA 95899-7416
916-327-2445

COLORADO

Board of Nursing
1560 Broadway
Suite 1370
Denver, CO 80202
303-894-2430

CONNECTICUT

CT Department of Public Health
P.O. Box 340308
Harford, CT 06134-0308
860-509-7596 or 860-509-8000

DELAWARE

Division of Long Term Care Residents
Protection
3 Mill Road, Suite 308
Wilmington, DE 19806
302-577-6666

DISTRICT OF COLUMBIA

Nurse Aide Registry/ Promissor
3 Bala Plaza West, Suite 300
Philadelphia, PA 19101-3481
888-274-6060

FLORIDA

Department of Health
MQA/ CNA Program
4052 Bald Cypress Way
BIN# C-13
Tallahassee, FL 32399-3263
850-245-4567

GEORGIA

Nurse Aide Program
1455 Lincoln Pkwy East
Suite 750
Atlanta, GA 30346-2200
800-414-4358 or 678-527-3010

HAWAII

Professional & Vocational
Licensing
P.O. Box 3469
Honolulu, HI 96801
808-734-2101 ext 122

IDAHO

Nurse Aide Program
P.O. Box 83720
Boise, ID 83720-0036
208-334-6626 or 800-748-2480

ILLINOIS

IL Dept of Public Health
Education and Training
525 West Jefferson
Springfield, IL 62761
217-785-5133

INDIANA

Dept of Health Division of
Long Term Care
2 N. Meridian St., Section 4B
Indianapolis, IN 46204
317-233-7351

IOWA

IA Dept. of Inspections and Appeals
Div. of Health Facilities
321 East 12th St.
Des Moines, IA 50319-0083
515-281-4077 or 866-876-1997

KANSAS

Health Occupations Credentialing
Unit
KS Dept of Health & Environment
1000 SW Jackson Ste. 200
Topeka, KS 66612-1365
785-296-6877

KENTUCKY

KY Board of Nursing
312 Whittington Pkwy, Suite 300
Louisville, KY 40222
502-429-3300

LOUISIANA

LA Nurse Aide Registry
5647 Superior Dr.
Baton Rouge, LA 70816
225-295-8575

MAINE

Maine Registry of Certified Nursing
Assistants
State House Station #11
41 Anthony Ave.
Augusta, ME 04333
207-624-7300

MARYLAND

Nursing Assistant Cert. Program
MD Board of Nursing
4140 Patterson Ave.
Baltimore, MD 21215-2254
410-585-1990

MASSACHUSETTS

Dept. of Health
Div. of Healthcare Quality
99 Chauncy St.
Boston, MA 02111
617-753-8000 or
617-753-8143

MICHIGAN

MI Dept. of Community Health
Bureau of Health Professions
P.O. Box 30670
Lansing, MI 48909
800-748-0252 or 517-241-0554

MINNESOTA

Nursing Assistant Registry
PO Box 64501
St. Paul, MN 55164-0501
651-215-8705

MISSISSIPPI

MS Dept. of Health
Bureau of Health Facilities-
Licensure & Certification
P.O. Box 1700
Jackson, MS 39215-1700
601-364-1100

MISSOURI

Dept. of Health and Senior
Services
P.O. Box 570
Jefferson City, MO 65102
573-526-5686

MONTANA

Dept. of Montana Pub. Health &
Human Services
2401 Colonial Dr. 2nd Floor
Helena, MT 59620-2953
406-444-4980

NEBRASKA

NE Health and Human Services
Regulation & Licensure
Credentialing Div.
P.O. Box 94986
Lincoln, NE 68509-4986
402-471-0537 or 402-471-4971

NEVADA

Bureau of Licensure and
Certification
1550 E. College Pkwy, # 158
Carson City, NV 89706
775-687-4475

NEW HAMPSHIRE

NH Board of Nursing
21 South Fruit St., Ste. 16
Concord, NH 03301-2431
603-271-8282 or 603-271-2323

NEW JERSEY

Health Facilities Evaluation &
Licensing
P.O. Box 367
Trenton, NJ 08625-0367
1-866-561-5914
609-633-9171

NEW MEXICO

DOH/DHI/Health Facility Licensing
& Certification
2040 S. Pacheco St.
2nd Floor, Rm. 413
Santa Fe, NM 87505
505-476-9039
505-827-1453

NEW YORK

Bureau of Professional Credentialing
NY State Dept of Health
161 Delaware Ave.
Delmar, NY 12054-1393
518-408-1297

NORTH CAROLINA

NC Nurse Aide Registry
Dept. of Health and Human Services
Div. of Facility Services
2709 Mail Service Center
Raleigh, NC 27699-2709
919-855-3969
919-715-0562

NORTH DAKOTA

Dept. of Health
600 E. Boulevard Ave.
Dept. 301
Bismarck, ND 58505-0200
701-328-2353

OHIO

OH Dept of Health
Nurse Aide Unit
246 North High St.
Columbus, OH 43215-2412
614-752-9500

OKLAHOMA

Dept. of Health
NA Registry
1000 NE 10th St
Oklahoma City, OK
73117-1299
405-271-4085 or 800-695-2157

OREGON

Board of Nursing
800 NE Oregon St
Ste 465
Portland, OR 97232
971-673-0679 or 971-673-0685

PENNSYLVANIA

NA Registry
Promissor
P.O. Box 13785
Philadelphia, PA 19101-3785
800-852-0518

RHODE ISLAND

Dept. Of Health Professions
3 Capitol Hill, Room 105
Providence, RI 02908-5097
401-222-5888

SOUTH CAROLINA

NA Registry/Promissor
3 Bala Plaza, Ste 300
Philadelphia, PA 19101-3481
800-475-8290

SOUTH DAKOTA

Board of Nursing
4305 S. Louise Ave.
Suite 201
Sioux Falls, SD 57106
615-362-2769

TENNESSEE

Dept of Health
Nurse Aide Registry
227 French Landing, Ste 501
Heritage Place, Metrocenter
Nashville, TN 37243
615-532-5171 or 800-778-4504

TEXAS

Long Term Care-
Dept. of Aging and Disability
Services
P.O. Box 149030-MCW420
Austin, TX 78714-9030
512-231-5829

UTAH

Health Technology Certification
Center
550 East 300 South
Kaysville, UT 84037-2699
801-547-9947

VERMONT

Board of Nursing/CNA
Heritage Bldg.
81 River St.
Montpelier, VT 05609
802-828-2819 or 802-828-2396 or
802-828-2453

VIRGINIA

Nurse Aide Registry
6603 W. Broad St.
5th Floor
Richmond, VA 23230
804-662-7310

VIRGIN ISLANDS

Board of Licensure
P.O. Box 4247
Veterans Drive Station
St. Thomas, VI 00803
340-776-7131

WASHINGTON

OBRA-Nurse Aide Registry
P.O. Box 45600
Olympia, WA 98504
98507
800-725-2596

WEST VIRGINIA

Office of Health Facilities Licensure
& Certification
1 Davis Square Ste 101
Charleston, WV 25301-1799
304-558-0050

WISCONSIN

Promissor-Nurse Aide Registry
P.O. Box 13785
Philadelphia, PA 19101-3785
877-329-8760

WYOMING

Board of Nursing
2020 Carey Ave., Ste 110
Cheyenne, WY 82002
307-777-3519



STATE OF TENNESSEE
DEPARTMENT OF HEALTH
227 French Landing, Suite 501
Heritage Place, Metrocenter
NASHVILLE, TENNESSEE 37243
TELEPHONE (615) 532-5171 or (800) 778-4504
FAX (615) 248-3601

VERIFICATION OF OUT-OF-STATE NURSE AIDE REGISTRATION

PART I: To be completed by nurse aide and forwarded to the state in which you are currently registered.

SOCIAL SECURITY NUMBER: _____ - _____ - _____ **BIRTH DATE:** _____ / _____ / _____
Month Day Year

SEX: Male Female **RACE:** White Black Hispanic American Indian/Alaskan
 Asian/Pacific Islander Other _____

NAME: _____
Last First Middle Maiden

ADDRESS: _____
Street, P.O. BOX, RR Apt. No.

City State Zip Code

PHONE NUMBER: (_____) _____
Area Code Number

HEIGHT: _____ **EYE COLOR:** _____

Are you currently working as a nurse aide: Yes No

Please indicate state(s) in which you are registered: _____

Have you ever been convicted of abuse or neglect of a person in your care, theft from a person in your care, or child abuse?

Yes No. If yes, please explain.

Are you currently under investigation for abuse or neglect of a person, theft from a person or child abuse? Yes No. If yes, please explain. _____

SIGNATURE: _____
My signature certifies that the above information is correct.

PART II: To be completed by the out-of-state Nurse Aide Registry.

Yes No Is the above nurse aide currently registered eligible on your Nurse Aide Registry in accordance with the requirements of the Omnibus Budget Reconciliation Act of 1987 and 1989?

If yes:

Registration Number: _____

Registration Date: _____

Expiration Date: _____

Method of Placement: Deemed Competency Examination Reciprocity
Which State: _____

Yes No Are there documented findings of abuse, neglect, or misappropriation of resident or resident's property, according to records on file in the office of the undersigned?

SIGNATURE: _____

TITLE: _____

AGENCY: _____

ADDRESS: _____

City State Zip Code

PHONE NUMBER: (_____) _____

DATE: _____

STATE SEAL

MAIL THIS FORM TO: Tennessee Department of Health
Nurse Aide Registry
227 French Landing, Suite 501
Heritage Place, Metrocenter
Nashville, TN 37243

PLEASE ATTACH A COPY OF YOUR SOCIAL SECURITY CARD AND PHOTO IDENTIFICATION HERE

Social Security Card	Photo Identification
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