

The following information is requested in order to assist in monitoring your Final Order. Please fill in the spaces below and return to the Compliance Management Unit within seven (7) working days. Please send to the following address:

Case Number: _____

**Medical Quality Assurance/Compliance Management Unit
4052 Bald Cypress Way, Bin C76
Tallahassee, Florida 32399-3251
(850) 245-4268**

Respondent Information		
Please send all disciplinary correspondence to:		
Practice Address	Home Address	
Please check the box if you are requesting a change of address: <input type="checkbox"/> change of address		
Name:	License #:	
Home Address:		
City:	State:	Zip:
Home Telephone: ()		
Email Address:		
Signature Required for Address Change:		
Practice Address:		
City:	State:	Zip:
Business Telephone: ()	Business Fax: ()	
Office Manager or Contact Person (Other than Respondent):		
Other State Currently Licensed in:		
Attorney Representation		
Name:		
Address:		
City:	State:	Zip:
Telephone: ()	Fax: ()	
Email address:		

GUIDELINES FOR REPORTING ACTION IN ANOTHER JURISDICTION

Section 464.018(1)(b), Florida Statutes (Guidelines for Disciplinary Action): Failing to report to the board, in writing, within 30 days if action has been taken against one's license to practice Nursing in another state, territory, or country. Please be advised, many states will take action on your license based upon the disciplinary action imposed by the State of Florida. If this occurs, you must report this to the Board of Nursing to avoid further disciplinary proceedings in Florida. Furthermore, many states have similar statutes for reporting disciplinary actions. If you are licensed in other states, you may want to contact those Board offices to advise them of your Florida action.