



**NORTH CAROLINA STATE BOARD OF EXAMINERS
FOR NURSING HOME ADMINISTRATORS
3733 NATIONAL DRIVE, SUITE 110
RALEIGH, NC 27612**

Reactivate License
 Change of Address

Biennial Renewal
 Inactive Status

PLEASE COMPLETE THE FOLLOWING INFORMATION

PLEASE TYPE OR PRINT

LICENSE NUMBER _____ LAST 4 DIGITS OF SOCIAL SECURITY # _____

NAME _____
FIRST MI LAST

1. HOME ADDRESS:

STREET OR P.O. BOX _____

CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER () _____ EMAIL _____

2. BUSINESS ADDRESS:

BUSINESS NAME _____

STREET OR P.O. BOX _____

CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER () _____ EMAIL _____

**PLEASE ANSWER ALL QUESTIONS AND PROVIDE
INFORMATION REQUESTED ON THE OTHER SIDE OF THIS
FORM AND ATTACH YOUR RENEWAL FEE OF \$500.00**

3.Have you been convicted, entered a plea of "no contest", or are charges currently pending against you, for committing a crime, felony or misdemeanor in the past two years? (Including DWI or alcohol related offenses, but not including minor traffic offenses.)**

Yes No (If "yes" please send an official copy of your criminal record and a written letter of explanation.)**

4.Have you been investigated, charged, or disciplined since the filing of your last renewal application, or are you currently under investigation by a governing licensing board or by a federal or state agency?**

Yes No (If yes, please send documentation with an explanation.)**

5.**Have you had an application for certificate or license denied, or certificate or license suspended, canceled or revoked by any state or federal agency or governing licensing board since filing your last renewal application?

Yes No (If yes, please send documentation with an explanation.)**

To verify your hours, please go to our website
www.ncbenha.org, print out the page with your Continuing
Education and attach it to your completed application
OR complete this portion of the application

6.	COURSE TITLE	SPONSOR	DATE OF PRESENTATION	CREDIT HOURS
----	--------------	---------	----------------------	--------------

****PLEASE DO NOT SEND COPIES OF YOUR CERTIFICATES UNLESS THE BOARD DOES NOT HAVE THE HOURS ON FILE.****

I hereby certify that, to the best of knowledge and belief, there are no misrepresentations or falsifications in the statements and answers I have given in this renewal application or in any other documents, or papers appended thereto.

Applicant's Usual Signature in Full _____