



OBRA Nurse Aide Registry
 Home and Community Living Administration
 PO BOX 45600 OLYMPIA, WA 98504-5600
 360 725 2597 (Message)

Nursing Assistant Registry Inquiry

Federal law requires NACs working in skilled nursing facilities/homes to work at least one paid shift of NAC nursing-related services at least once every 24 months to remain active on the OBRA Registry. New hires must be submitted at least three business days in advance and verification received before offering or hiring a potential NAC; OBRA renewals are made every 24 months; and terminations after the last date employed. E-mail completed form to OBRARegistry@dshs.wa.gov.

All fields / columns must be typed and be completed.

Facility / Agency Submitting Form	Contact Person	Direct Phone Number / Extension
Return Email Address	Address	City State Zip Code

Submitting this form indicates employer has verified all work history.

Employee's Name (Last, First, Middle Initial)	Date of Birth (MM/DD/YYYY)	Social Security Number XXX-XX-XXXX	NAC Credential Number	Indicate New Hire, Renewal, Termination (and include NAC Work History as needed)	Start Date / First Date Employed as NAC (MM/DD/YYYY)	Last Date Employed as NAC (MM/DD/YYYY)
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

Link to form: <https://www.dshs.wa.gov/altsa/residential-care-services/nurse-aide-registry>