

**Office of Health Care Quality
Nursing Home Change of Ownership (CHOW) Application
Director of Nursing Agreement**

Director of Nursing
Responsibilities of the Director of Nursing
COMAR 10.07.02.20 describes the responsibilities of the director of nursing. A copy of the written agreement between the nursing home and director of nursing must be submitted to OHCQ upon initial licensure or when a change of ownership occurs.
Full Name of Director of Nursing:
Title:
State of Licensure:
License Number:
Expiration Date:
Name of Nursing Home:
Business Email:
Business Phone:
Business Fax:
Signature: By signing below, the individual certifies they are a licensed registered nurse who is currently employed fulltime as the director of nursing at the above named nursing home.
Signature of Director of Nursing:
Date:
Signature: By signing below, the administrator certifies that the director of nursing is a licensed registered nurse who is currently employed fulltime as the director of nursing at the above named nursing home.
Full Name of Administrator:
Signature of Administrator:
Date: