



IDAHO

DIVISION OF OCCUPATIONAL & PROFESSIONAL LICENSES

- BOARD OF NURSING -



BRAD LITTLE - GOVERNOR
 RUSSELL S. BARRON - ADMINISTRATOR
 JUDY TAYLOR - BOARD CHAIR

PO Box 83720
 BOISE, ID 83720-0061
 PHONE: (208)577-2476
 FAX: (208)577-2490

NOTICE OF TERMINATION FOR REASONS OF ADULTERATION OR MISAPPROPRIATION OF CONTROLLED SUBSTANCE

Reporting Employer	
Address	
Phone/Fax No	
Contact Person	

Name of Terminated Employee	
Address	
License Type/License #	
SSN# or DOB	
Date of Termination	
Reason for Termination	
Description of controlled substance adulteration or misappropriation of controlled substances involved in the termination. Include: name of drug, date, and time of occurrence, etc.	

This notice of termination is filed and subject to disclosure pursuant to Section 37-117A, Idaho Code, and will be maintained for fifteen (15) years from date of receipt by the professional licensing board.

If further information reveals this report was made in error, the reporting entity is responsible for submitting a retraction.

OFFICE LOCATED AT:
 11351 W CHINDEN BLVD
 BOISE, ID 83714