



## Office of Nurse Registration and Nursing Education Nurse License Compact (NLC) Status Form

***This form should be used to notify the Rhode Island Office of Nurse Registration and Nursing Education with your current Primary State of Residency (PSOR). If Rhode Island is your PSOR, you must provide proof of residency (copy of a valid Rhode Island driver's license, voter registration card showing your home address, federal income tax return stating your PSOR, or a military form 2058).***

***Effective January 1, 2024, the State of Rhode Island rejoined the Nurse Licensure Compact. NLC rules permit a nursing professional to have only one multi-state license (MSL) to practice in participating Compact states, and that license must be issued from your PSOR.***

***If you have an MSL in your PSOR, your Rhode Island single-state nursing license will be inactivated on January 1, 2024. You may continue to practice nursing in Rhode Island under the NLC.***

Date submitted:

Rhode Island Department of Health (RIDOH) license number:

Current name on RIDOH license:

Date of birth:

Social Security Number:

### **PSOR Information**

Home address:

City:

State:

ZIP:

Phone:

Email:

*The email you provide will be the email of record for all communication related to your licensure in the State of Rhode Island.*

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## **Nurse License Compact (NLC) Single State Request**

I am requesting a Rhode Island Single State License (SSL)

*The information above identifies my current PSOR. Although the above state is part of the NLC, I do not hold a multi-state license, and I am hereby requesting to maintain a Rhode Island SSL.*

Signature:

**Email this completed form with any supporting documentation to  
RIDOH.NLC@health.ri.gov**

**RIDOH Office of Nurse Registration and Nursing Education  
3 Capitol Hill, room 103, Providence, RI 02908**