



## NICOLE T WHITE

### License Number: CNA311053

Data As Of 7/7/2025

Profession	Certified Nursing Assistant
License	CNA311053
License Status	Revoked/Active
License Expiration Date	5/31/2024
License Original Issue Date	01/26/2015
Address of Record	If further information is needed, please contact the Department of Health at (850) 488-0595.
Discipline on File	Yes
Public Complaint	Yes
Alerts	Enforcement Alert 5/2/2025 4:07:10 PM Emergency Suspension Order filed 07/08/2024....Emergency Suspension Order filed 05/02/2025.

### Secondary Locations

No secondary locations found.

### Discipline/Admin Action

#### Emergency Actions

Name	License	Profession	City	County	State	Case #	Action Taken	Action Date
WHITE, NICOLE	311053	CERTIFIED NURSING ASSISTANT	WEWAHITCHKA	GULF	FL	202209839	ESO ISSUED	05/02/2025

#### Discipline Cases

Name	License	Profession	City	State	Case #	Action Taken
WHITE, NICOLE T	311053	CERTIFIED NURSI	WEWAHITCHKA	FL	202428681	REVOCATION

#### Public Complaints

Name	License	Profession	City	State	Case #	Action Taken
WHITE, NICOLE T	311053	CERTIFIED NURSING ASSISTANT	WEWAHITCHKA	FL	202209839	AC FILED
WHITE, NICOLE T	311053	CERTIFIED NURSING ASSISTANT	WEWAHITCHKA	FL	202428681	AC FILED

If a link does not appear for the case number, we do not have a scanned copy of the final order available in our database. To obtain a paper copy, please contact Public Records by clicking the link below:

[Discipline Public Records Request](#)

You may also contact Public Records by telephone at (850) 245-4252, option 4 or by written correspondence at:  
Division of Medical Quality Assurance  
Public Records  
4052 Bald Cypress Way, Bin C01  
Tallahassee, FL 32399-3251

Please include the following:

1. Full name and license number of the practitioner;
2. Name and address where documents are to be sent; and
3. If you require certification of the documents, a \$25 fee will be charged, in addition to the duplicating charges. Certification of the requested records will not be done unless specifically requested. An invoice will be sent to you and payment will be expected within thirty days. Upon receipt of payment, material will be sent to you.

The information on this page is a secure, primary source for license verification provided by the Florida Department of Health, Division of Medical Quality Assurance. This website is maintained by Division staff and is updated immediately upon a change to our licensing and enforcement database.

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