Edgar Filing: Greene Greg - Form 4

Greene Greg												
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May 08, 2008	8											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL					
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287		
Check this box if no longer										Expires:	January 31,	
subject to		MENT O	F CHAN	NGES IN BENEFICIAL OWNERSHIP O						Estimated average		
Section 1				SECU	JRI	TIES				burden hours per		
Form 4 of Form 5	rm 4 or rm 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response 0.5					
obligation	ns Section 17								of 1935 or Sectio	m		
may conti <i>See</i> Instru	inue.		of the Inv	•		•	- ·			/11		
1(b).	iction	()				r	,					
(Print or Type R	Responses)											
Greene Greg Symbol CROS				2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY					5. Relationship of Reporting Person(s) to Issuer			
			-									
			HEALT				RN1		(Check all applicable)			
(Last)	(First)	(Middle)				-	·]		Director	10%	6 Owner	
				. Date of Earliest Transaction Month/Day/Year)					X Officer (give title Other (specify			
				05/06/2008					below) below) Pres., Cross Country Education			
ROAD, SUI	TE J								,			
			4. If Amer	. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mon	led(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person			
NASHVILL	e, TN 37217.								_X_ Form filed by M Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Nor	1-De	rivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Da	ate 2A. Dee	emed	3.		4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea	on Date, if TransactionAcquired (A) or						Securities	Form: Direct	Indirect		
(Instr. 3)		CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership					
		× ·	<i>,</i>		-	× ,			Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported Transaction(s)			
				C 1	17		or	р.	(Instr. 3 and 4)			
Common				Code	V	Amount	(D)	Price				
Stock	05/06/2008			А		5,000	А	\$0	9,230	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e Expiration I (Month/Day	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (I	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Appreciation Rights	\$ 13.02	05/06/2008		А	2,087	(1)	05/06/2015	Common Stock	2,087	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Greene Greg 1645 MURFREESBORO ROAD SUITE J NASHVILLE, TN 37217			Pres., Cross Country Education				
Signatures							

/s/ Gregory 05/06/2008 Greene

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) The stock appreciation rights vest in four equal installments beginning on May 6, 2009.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.