FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Gulacsy Elizabeth					2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC [ CCRN ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owne  X Officer (give title Other (spec				
(Last) 6551 PAR	(Firs	st) (M IMERCE BLVD	fiddle)		3. Da			Transa	action (Mo	onth/E	Day/Year)	1	below)			below)	poony		
(Street) BOCA RATON FL 33487 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	e I - Nor	-Deriv	ative	Seci	urities	Acq	uired,	Dis	osed o	f, or	Bene	ficiall	y Owned				
			2. Transaction Date (Month/Day/Year)		r) Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction D Code (Instr. 5)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			A) or B, 4 and		s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(/	A) or D)	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)
				06/01/2011					А		5,000	,	Α	\$0	8,8	300	D		
				06/01	1/2011				F		290(1)		D	\$7.44	8,510		D		
		Ta									osed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	Date,	4. Transactior Code (Instr 8)		n of l		6. Date Ex Expiration (Month/Da	n Date	•	Amou Secur Unde Deriv	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisal		Expiration Date	Title	O N O	umber					
Stock Appreciation	\$7 <i>44</i>	06/01/2011			А		5,000		(2)		06/01/2018	Comr	non	5 000	\$0	20.12		D	

## **Explanation of Responses:**

- 1. The shares were withheld to satisfy Ms. Gulacsy's tax withholding obligation for restricted stock which vested on June 1, 2011.
- $2. \ The stock appreciation \ rights \ vest \ in four \ equal \ installments \ beginning \ on \ June \ 1, \ 2012.$

## Remarks:

Rights

/s/ Elizabeth Gulacsy

06/02/2011

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.