FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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

1. Name ar	<u>CF</u>	2. Issuer Name and Ticker or Trading Symbol CROSS COUNTRY HEALTHCARE INC CCRN]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) 17801 FI	(Last) (First) (Middle) 17801 FIELD BROOK CIRCLE W.						3. Date of Earliest Transaction (Month/Day/Year) 11/16/2007								X Officer (give title below) Other (specify below) Pres & Chief Exec Officer			
(Street)	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)											Person							
		Tab	le I - No	1		_			-	Dis	sposed o							
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Dat			Code (Instr. 5)					Securi Benefi Owne	5. Amount of Securities Beneficially Owned Following Reported		Direct Indirect Istr. 4)	7. Nature of ndirect Beneficial Dwnership
								v	Amount	(A) or (D)	Price	Transa	Transaction(s) (Instr. 3 and 4)			Instr. 4)		
Common	Stock	/2007	2007			M		8,000	A	\$10.	38 1	188,761		D				
Common										8	4,815		I :	By wife ⁽¹⁾				
Common									2	24,903			By children ⁽²⁾					
		Т	able II -								osed of converti			y Owne	i			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution	n Date, Transa Code (I				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price (Derivativ Security (Instr. 5)		es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares	1				
Employee Stock Option (right to	\$10.38	11/16/2007			M			8,000	12/31/20	05	04/11/2013	Common Stock	8,000	\$0	5,88	32	D	

Explanation of Responses:

- 1. Mr. Boshart's wife holds 84,815 shares.
- 2. Each of Mr. Boshart's three children each owns 8,301 shares.

Remarks:

/s/ Joseph A. Boshart

11/17/2007

** Signature of Reporting Person Date

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

- * 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.