



3. **Consideration for Reinstatement:** Upon written request by Mr. Holley, the Board shall meet with Mr. Holley to discuss and consider appropriate terms and conditions leading to reinstatement of his license.
4. **Miscellaneous Provisions:** Stanley O. Holley understands that this document is a Consent Agreement which affects his rights to practice nursing in Maine. This Consent Agreement may be amended only in writing, signed by all the parties. Stanley O. Holley understands that he does not have to execute this Consent Agreement and that he has the right to consult with an attorney before entering this Consent Agreement. Any modification of this Agreement must be in writing and signed by all the parties. Stanley O. Holley affirms that he executes this Consent Agreement of his own free will.
5. **Effective Date:** This Consent Agreement becomes effective upon the last necessary signature below.

DATED: January 28, 1999



STANLEY O. HOLLEY

DATED: January 28, 1999


THOMAS G. VAN HOUTEN, Esq.
Attorney for Stanley O. Holley


**FOR THE MAINE STATE BOARD
OF NURSING:**

DATED: February 24, 1999


MYRA A. BROADWAY, J.D., M.S., R.N.
Executive Director

**FOR THE DEPARTMENT OF
ATTORNEY GENERAL:**

DATED: February 24, 1999


SUSAN A. SPARACO
Assistant Attorney General