

**State of Alaska  
Department of Health & Social Services  
Division of Health Care Services  
Certification & Licensing**

**Administrator's Designation**

I, \_\_\_\_\_, designate \_\_\_\_\_

to act as administrator on my behalf for any period less than 90 days during which I am absent from my assisted living home.

7 AAC 75.210 (A) (2) (B)

An assisted living home shall appoint an administrator who meets the requirements of 7 AAC 75.230 and administrator designee to act on the administrator's behalf for any period during which the administrator is on vacation, is ill, or is otherwise unable to perform regular duties for 24 hours or more; if the administrator designee will be required to manage the daily operation of the home for 90 consecutive days or longer, the designee must have the same qualifications as an administrator under 7 AAC 75.230.

\_\_\_\_\_  
Administrator's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Administrator

\_\_\_\_\_  
Print Name of Assisted Living Home

\_\_\_\_\_  
Printed Name of Designee