FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL	
	-

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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 and Address of Reporting Person* OFFENSEND DAVID G						2. Issuer Name and Ticker or Trading Symbol HUDSON HIGHLAND GROUP INC								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
OLI DIAGRIAD DAVID (I						HHGP]								X Director 10% Owner					
(Last)	ast) (First) (Middle)					-								Officer (give title below)			Other (specify below)		
C/O THE NEW YORK PUBLIC LIBRARY						3. Date of Earliest Transaction (Month/Day/Year) 04/17/2006													
FIFTH A	VENUE A	ND 42ND STRE	ET,	ROOM 210		17720													
					_ 4.1	f Amer	ndmen	t, Dat	e of Or	iginal F	Filed (Month/D	ay/Year)		. Individual or	Joint/C	Group Filing	g (Check Ap	plicable	
(Street)														Line) X Form filed by One Reporting Person					
NEW YORK NY 1001			8								Form filed by More than One Reporting Person								
(City)	(S	tate)	(Zip)											Persor	ı				
		Tab	le I -	Non-Deriv	vative	Sec	uriti	es A	cqui	red, [Disposed (of, or E	Benefici	ally Owned	d				
1. Title of Security (Instr. 3)			2. Transactio Date (Month/Day/Y	ear) i	f any	ution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following		6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4)	ct Indired rect Benefi Owner	Ownership (Instr.		
								Ī	Code	v	Amount	(A) or (D)	Price	Reported Transaction(s (Instr. 3 and 4			4)		
																	By D	eferred	
Common Stock				04/17/200	06	04/19/		6	A		1,056.38	A	\$16.92	3,666.893		I		Compensation Plan ⁽¹⁾	
Common Stock														25,000 I		D			
		Т	able	II - Deriva (e.g., ړ							sposed of s, converti								
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. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
													Amoun or Numbe						
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	of Shares						
Director Stock Option (right to	\$6.83									(2)	04/11/2013	Commo Stock	50,000		5	0,000	D		

Explanation of Responses:

- 1. Balance reflects the reporting person's holdings in the Hudson Highland Group, Inc. Deferred Compensation Plan as of the date of this filing.
- 2. Grant to reporting person of option to buy shares of common stock under the Hudson Highland Group, Inc. Long Term Incentive Plan. The option vests and becomes exercisable as follows: 40% immediately upon the date of grant, 60% after 1st anniversary of the date of grant, 80% after 2nd anniversary, and 100% after 3rd anniversary

By: Benjamin F. Garmer, III, Attorney-In-Fact

04/19/2006

** 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.