

CRISTINA SMITH, ADT  
4819 Fernley Sq.  
Arbutus, MD 21227

Mary N. Drotleff, MS, LCMFT  
Board Chair  
Maryland State Board of Professional Counselors and Therapists  
4201 Patterson Avenue  
Baltimore, MD 21215

**Re:** Surrender of Certificate to Practice as a An Alcohol and Drug Trainee ("ADT")  
License No: ADT2408  
Case No.: 2021-026

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Dear Ms. Drotleff and Members of the Board:

Please be advised that pursuant to MD Code Ann., Health Occ., § 17-508 (2014 Repl. Vol. & 2018 Supp.) as a regulated counselor or therapist trainee, I have decided to **SURRENDER** my authorization to practice supervised alcohol and drug counseling, therapy or otherwise in the State of Maryland, License Number ADT2408, effective upon the acceptance of this letter by the Board Chair. I understand that upon the Maryland State Board of Professional Counselors and Therapists ("the Board's") acceptance of this Letter of Surrender, I may not represent to the public by title, description of services, methods, procedures or otherwise that I am an authorized Alcohol and Drug Trainee. Moreover, I understand that I may not practice counseling, therapy, clinical or non-clinical, as defined in the Maryland Professional Counselors and Therapists Act ("the Act"), Md. Code Ann., Health Occ., §§ 17-101 *et. seq.* I also understand that the surrender of my certification means that I am in the same position as an unlicensed/uncertified individual.

I understand that this Letter of Surrender is a **PUBLIC DOCUMENT**, and upon the Board's acceptance, becomes a **FINAL ORDER** of the Board.

I acknowledge that on April 16, 2021, the Board issued a Consent Order that granted my Alcohol and Drug Trainee Application and placed my status on Probation for the entirety of my ADT period. I acknowledge that the Board's initial denial of my Application and the subsequent Consent Order were the result of the Board's investigation into my criminal court records. I acknowledge that the factual summary contained in the April 16, 2021 Consent Order (attached herein) is a true and accurate reflection of my criminal history and application process. I acknowledge that the Board based the terms of my probation in the April 16, 2021 Consent Order on the following statutory provisions:

**Health Occ. § 17-509. Denial, probation, suspension or revocation of trainee status, license, or certificate.**

Subject to the hearing provisions of § 17-511 of this subtitle, the Board, on the affirmative vote of a majority of its members then serving, may deny trainee status, a license, or a certificate to any applicant, place any trainee, licensee, or certificate holder on probation, reprimand any trainee, licensee, or certificate holder, or suspend, rescind, or revoke the status of any trainee, a license of any licensee, or a certificate of any certificate holder if the applicant, trainee, licensee, or certificate holder:

(2) Habitually is intoxicated

...

(10) Is convicted or pleads guilty or nolo contendere to a felony or a crime of moral turpitude, whether or not any appeal or other proceeding is pending to have the conviction or plea set aside[.]

I acknowledge that per the terms of the April 16, 2021 Consent Order, my ADT status was granted, but placed on **PROBATION** for the entirety of my ADT period, under the following terms and conditions:

1. The Applicant shall continue to attend/engage in individual psychotherapy with an individual psychotherapist in Maryland or Washington, D.C., Board-approved and in good standing, for a minimum of one, one-hour session per month for the entirety of her ADT period at her own expense, with a treatment summary provided to the Board on a quarterly basis.
2. The Applicant shall arrange for the Applicant's supervisor(s) at the Applicant's place(s) of employment to submit written quarterly work-site reports to the Board evaluating the Applicant's work performance and practice as an ADT. If the Applicant's employment terminates at any of the Applicant's place(s) of employment before the due date of a quarterly report, then a final work-site report is due on the last day of employment. It is the Applicant's responsibility to ensure that work-site reports are submitted to the Board and to notify the Applicant's supervisor when these reports are due.
3. The Applicant will submit to a minimum of one (1) random, quarterly, urine toxicology screen, per quarter, which are to be coordinated by her individual psychotherapist. The results of such screens shall be included in the individual psychotherapist's quarterly report.


I acknowledge that on May 10, 2022, the Board received my request to terminate the probation of my ADT authorization. I acknowledge that on July 21, 2022, after a review of my case file and other pertinent information, the Board decided to deny my request to terminate probation.

NOTARY PUBLIC

STATE/DISTRICT OF: Maryland  
CITY/COUNTY OF: Howard

I HEREBY CERTIFY that on this 28 day of November, 2022, before me, a Notary Public of the State/District and City/County aforesaid, personally appeared **CRISTINA SMITH**, and declared and affirmed under the penalties of perjury that signing the foregoing LETTER OF SURRENDER was her voluntary act and deed.

AS WITNESS, my hand and Notarial Seal.

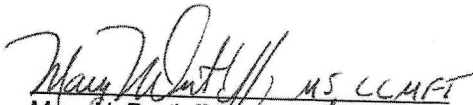
Notary Public: 

My Commission Expires: 2/27/2025

SHAKIRA REAZER JONES  
NOTARY PUBLIC  
CARROLL COUNTY  
MARYLAND  
My Commission Expires Feb. 27, 2025

ACCEPTANCE

On this 16th Day of December, 2022, I, Mary N. Drotleff, M.S., LCMFT, on behalf of the Maryland State Board of Professional Counselors and Therapists, hereby accept Cristina Smith's **PUBLIC SURRENDER** of her Alcohol and Drug Trainee authorization in the State of Maryland pursuant to Md. Code Ann., Health Occ. § 17-508 (2014 Repl. Vol. & 2018 Supp.)

 M.S. LCMFT  
Mary N. Drotleff, M.S. LCMFT  
Board Chair

Maryland State Board of Professional Counselors and Therapists

I have decided to surrender my authorization in lieu of continuing my probation and to avoid prosecution and/or any further disciplinary actions that the Board might pursue against me, including violations of the terms of my probation and the April 16, 2021 Consent Order.

I have voluntarily, knowingly, and freely chosen to submit this Letter of Surrender. I understand that, by the execution of this Letter of Surrender, I am waiving the right to contest the Board's denial of my request to terminate probation, at which I would have the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf and to all other substantive and procedural protections provided by the law, including the right to appeal.

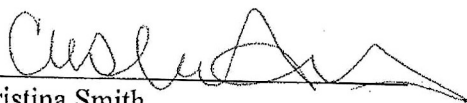
I understand that the Board will advise the National Practitioner Data Bank of this Letter of Surrender, and in any response to the inquiry, that I have surrendered my license in lieu of disciplinary action under the Act as a resolution of the matters pending against me and in lieu of complying with any of the requirements of my current probation. I also understand that in the event I would apply for licensure in any form in any other state or jurisdiction, that this Letter of Surrender, and all underlying documents, may be released or published by the Board to the same extent as a final order that would result from disciplinary action pursuant to Md. Code Ann., Gen. Prov., §§ 4-101 *et seq.* (2014).

I hereby affirm that I have terminated any alcohol and drug counseling practice I had under my authorization, License Number ADT2408, in Maryland.

I recognize and agree that by submitting this Letter of Surrender, my authorization will remain surrendered unless and until the Board grants reinstatement of my authorization. I understand that if I apply for reinstatement of my Maryland authorization, the Board or its successor has absolute discretion in granting or denying my application for reinstatement without a hearing and with no right on my part for a judicial review of the Board's decision. I further understand that if I file a petition for reinstatement, I will approach the Board or its successor in the same position as an individual who has previously surrendered or lost his or her property rights in his or her alcohol drug counseling certification.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. I have been advised of my right to be represented by an attorney of my choice throughout proceedings before the Board, including the right to consult with an attorney prior to signing this Letter of Surrender. I understand both the nature of the Board's actions and this Letter of Surrender fully. I acknowledge that I understand and comprehend the language, meaning, and terms and effect of this Letter of Surrender. I make this decision knowingly and voluntarily.

Sincerely,

  
Cristina Smith

Date: 11/28/22