

**Kristen Evans**  
**License Numbers: LC9804**  
March 20, 2026

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Sharita Sivels-Stevens, LCPC, Board Chair  
Maryland State Board of Professional Counselors & Therapists  
4201 Patterson Avenue  
Baltimore, Maryland 21215

RE: Surrender of Licensed Clinical Professional Counselor License  
License Numbers: LC9804  
Case Numbers: 2025-159

Dear Ms. Sivels-Stevens and Members of the Board:

Please be advised that I have decided to **SURRENDER** my license to practice as a Licensed Clinical Professional Counselor ("LCPC") in the State of Maryland, License Number LC9804, effective upon acceptance of this letter by the Maryland State Board of Professional Counselors and Therapists (the "Board"). I understand that upon acceptance of this letter of surrender by the Board, I may not represent to the public by title, description of services, methods, procedures, or otherwise that I am a licensed clinical professional counselor as it is defined in the Maryland Professional Counselors and Therapists Act (the "Act"), Md. Code Ann., Health Occ. §§ 17-101 *et seq.* (2021 Repl. Vol. & 2024 Supp.) and other applicable laws. In other words, as of the effective date of this Letter of Surrender, I understand that the surrender of my LCPC license means that I am in the same position as an unlicensed individual in the State of Maryland.

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 the Board voted to accept a surrender of my license, prior to the issuance of any disciplinary charges. If the Board had issued formal disciplinary charges against me, I understand that I would have been charged and disciplined under Title 17, section 509 of the Health Occupations Article.

I have decided to surrender my license to practice clinical professional counseling in the State of Maryland to avoid prosecution by the Board. I acknowledge that the Board has sufficient evidence to prove by a preponderance of the evidence at an administrative hearing that I engaged in behavior that constitutes a violation of the Act.

I understand that by executing this Letter of Surrender, I am waiving any right

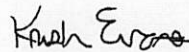
to a formal evidentiary hearing at which I would have the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf and all other substantive and procedural protections provided by law, including the right to appeal.

I understand that the Board, in response to any inquiry, will advise that I have surrendered my license to practice clinical professional counseling services. 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 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.* (2019 Repl. Vol. & 2025 Supp.), and that this Letter of Surrender constitutes a disciplinary action by the Board.

I further recognize and agree that by submitting this Letter of Surrender, my licenses to practice clinical professional counseling will remain surrendered unless and until I petition the Board for reinstatement or apply for a new license. I understand that when petitioning for reinstatement or applying for a new Maryland license, I will approach the Board in the same posture as an individual whose clinical professional counseling has been revoked and that the Board has sole discretion to accept or deny any application that I may submit. I further agree that if the Board reinstates my license to practice clinical professional counseling services, the Board may set additional terms and conditions that shall apply to my reinstated license, which may include the imposition of probation.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. Finally, I wish to make clear that I have been given the opportunity to consult with an attorney before 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, terms, and effect of this Letter of Surrender. I make this decision knowingly, voluntarily and without any duress.

Sincerely,



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Kristen Evans, LCPC

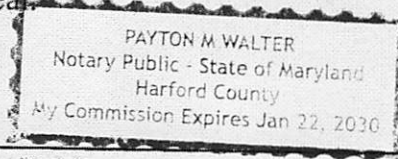
NOTARY

STATE OF MARYLAND

CITY/COUNTY OF Harford

I HEREBY CERTIFY that on this 6<sup>th</sup> day of 2026,  
2026, before me, a Notary Public of the State and City/County aforesaid, personally  
appeared KRISTEN EVANS, 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: January 22, 2030

**ACCEPTANCE**

On this 20 day of March 2026, I, Sharita Sivels-Stevens, LCPC,  
Board Chair, on behalf of the Board, accept the **PUBLIC VOLUNTARY SURRENDER**  
of the Licensed Clinical Professional Counselor license **Kristen Evans, LCPC**, to  
practice clinical professional counseling the State of Maryland.



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Sharita Sivels-Stevens, LCPC  
Board Chair  
Maryland State Board of Professional  
Counselors and Therapists