Tina M. Hyatt, LGSW

SEP 0 2 2014

Date: 8/22/14

Mark R. Lannon, LCSW-C Board Chair Maryland State Board of Social Work Examiners 4201 Patterson Avenue Baltimore, Maryland 21215-2299

RE: Surrender of License (LGSW)

License Number: G11102 Case Number: 2011-1628

Dear Ms. Levy:

Please be advised that I hereby **SURRENDER** my license to practice licensed graduate social work in the State of Maryland, License Number G11102, effective immediately. I understand that upon surrender of my license, I may not perform licensed graduate social work in the State of Maryland as it is defined in the Maryland Social Workers Act (the "Act"), Md. Code Ann., Health Occ. ("Health Occ."), §§ 19-101 et seq., (2009 Repl. Vol. & 2013 Supp.) and other applicable laws. I understand that the surrender of my 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.

My decision to surrender my license to practice licensed graduate social work in the State of Maryland arises from Board's investigation, which determined that I had committed violations of the Act as described in the Board's charges, attached hereto and incorporated herein as Exhibit 1. In addition, the investigation determined that I violated the terms of my previous Consent Order, attached hereto and incorporated herein as Exhibit 2.

I voluntarily submit this Letter of Surrender in order to avoid prosecution of the aforementioned charges under the Act. I acknowledge that if my case were to proceed to an evidentiary hearing, the Board would prove the allegations it made in this case, and that for all purposes relevant to licensure, those allegations will be treated as if proven.

I understand that by executing this Letter of Surrender I am waiving any to a formal evidentiary hearing at which I would have had the right to exercise all substantive and procedural protections provided by law, and any right to appeal.

I understand that the Board may disclose to relevant national databases or others duly authorized that I have surrendered my license in lieu of further disciplinary action under the Act. I also understand that this Letter of Surrender and the underlying investigative 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., State Gov't., § 10-611 et seq., (2009 Repl.), and that this Letter of Surrender is considered a disciplinary action by the Board.

I acknowledge that upon the Board's acceptance of this Letter of Surrender, I shall remit to the Board my original Maryland license number G11102 and all other official indicia of licensure.

Should the Board accept this Letter of Surrender, I agree not to practice licensed graduate social work in the State of Maryland unless and until I am subsequently reinstated or granted a new license by the Board.

I recognize and agree that by submitting this Letter of Surrender, my license in Maryland will remain surrendered for a minimum of one (1) years and until such time as I successfully apply for reinstatement. I understand that when applying for reinstatement or a new license, I approach the Board in the same posture as one whose license has been revoked and agree that the Board shall have sole discretion to accept or deny any application I may file, or to impose conditions of acceptance on the application, irrespective of whether I meet the requirements of the Act or the implementing regulations.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason. Finally, I have had the opportunity to consult with counsel before signing this Letter of Surrender, but have declined to do so. I understand the meaning, and effect of this Letter of Surrender.

Very truly yours,

Tina M. Hyatt, LGSW

Tina M. Hyatt, LGSW, Letter of Surrender Page 3 of 3

NOTADY
NOTARY
STATE OF PA
CITY/COUNTY OF 46/K
I HEREBY CERTIFY that on this day of
AS WITNESS my hand and Notarial seal.
Notary Public
My Commission expires: O1/12/2016 My Commission expires: O1/12/2016 Commonwealth of Pennsylvania Notarial Seel Oerek R. Trone, Notary Public City of York, York County My Commission Expires Jan. 12, 2016 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIA

BOARD ACCEPTANCE

On this 12TH day ofSEPTEMBER_	, 2014, I, Mark R. Lannon,
LCSW-C, on behalf of the Maryland State Board	of Social Work Examiners, accept the
above letter of surrender of the license to practice	e licensed graduate social work in the
State of Maryland of Tina M. Hyatt, LGSW.	

Mark R. Lannon, LCSW-C

Board Chair

Maryland State Board Social Work Examiners