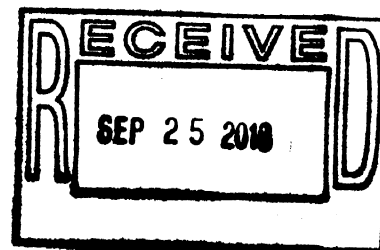


Michael Steven Archer, License #05194

Wanda Banks, MA, OTR/L
Chairperson, Maryland Board of Occupational Therapy Practice
Spring Grove Hospital Center,
Bland Bryant Building, 4th Floor,
Baltimore, MD 21228



RE: Surrender of License to Practice as an **Occupational Therapist**
License Number 05194

Dear Ms. Banks:

I agree to voluntarily surrender my license to practice as an **occupational therapist** in the State of Maryland, license number **05194**, to the Maryland Board of Occupational Therapy Practice (the "Board"). I understand that I may not engage in **occupational therapy** practice, with or without compensation, as it is defined in the Maryland Occupational Therapy Practice Act (the "Act"), Md. Code Ann., Health Occ. ("H.O.") § 10-101 *et seq.* and the Board's regulations, COMAR 10.46.01 *et seq.* In other words, as of the effective date of this Letter of Surrender, I understand that I am in the same position as an individual who is not licensed to practice as an occupational therapy assistant. I understand that this Letter of Surrender shall become a **PUBLIC** document and shall become effective on the date of the Board's acceptance of this Letter of Surrender. I agree that this letter may be released or published by the Board as a final decision and order under the Public Information Act, Md. Code Ann., General Provisions §§ 4-101 *et seq.*

On or about October 7 2017 and October 26, 2017, the Board notified me of an audit for continuing competency hours. During the 2017 renewal I attested to being certified by the National Board for Certification in Occupational Therapy ("NBCOT"). After verification by the Board with NBCOT, it was discovered that I was not NBCOT certified and that I had falsified my renewal documentation. As the result of these discrepancies, I was afforded the opportunity to produce certificates of completion for the 12 contact hours needed for the period of January 1, 2016 through June 30, 2017 for licensure renewal. I notified the Board in December, 2017 that I had not completed my 12 contact hours for 2016. As a result, on January 19, 2018, the Board offered a Pre-Charge Consent Order of Probation in lieu of issuing Charges for violation of the Maryland Occupational Therapy Practice Act (the "Act") and COMAR. I understand the Board believes it has sufficient information to charge my OT license with a violation of the Act, specifically H.O. § 10-315(5) ("Violates any rule or regulation of the Board, including any code of ethics adopted by the Board"). I understand that, if this matter proceeded to an evidentiary hearing before the Board, there likely is sufficient evidence to find and conclude as a matter of law that I violated H.O. § 10-315(5) and I understand that the Board could sanction my license accordingly. Thus, on July 16, 2018, I notified the Board that I cannot meet the requirements of

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LETTER OF SURRENDER

Michael Steven Archer, LICENSE NUMBER 05194

my Pre-Consent Order of Probation and it is my desire to surrender my license to practice as an occupational therapist at this time.

In executing this agreement to surrender my license to practice as an occupational therapist to the Board, I agree that I will not apply for reinstatement for a period of **TWO (2) YEARS** following the date of the Board's acceptance of this Letter of Surrender. I also agree that if, after a period of **TWO (2) YEARS**, I decide to apply for reinstatement as an occupational therapist in Maryland, I will approach the Board in the same posture as an unlicensed individual whose license has been revoked. In considering my application for reinstatement, the Board may review my entire Board file, including any information the Board receives after execution of this letter. I understand that it will be my burden, as an applicant for reinstatement, to demonstrate that I meet all of the Board's requirements for reinstatement of my license at the time I submit a reinstatement application. I understand that if the Board reinstates my license, it will be reinstated through the Board's disciplinary process and that my license will only be reinstated by the Board's issuance of a public order of reinstatement and that the Board may, in its discretion, place my reinstated license on probation subject to terms and conditions.

I wish to make it clear that I have voluntarily, knowingly, and freely chosen to submit this Letter of Surrender. I understand that, by executing this Letter of Surrender, I am waiving the right, now and in the future to any evidentiary hearing at which I would have the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, to contest the facts summarized in the second paragraph of this Letter of Surrender and at which I would have the right to all other substantive and procedural protections provided by law, including the right to appeal.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. I understand the nature and effect of both the Board's actions and this Letter of Surrender fully. Finally, I wish to make clear that I have had an opportunity to discuss this matter with legal counsel and I willingly, knowingly and voluntarily sign this letter of surrender.

Sincerely,



Michael Steven Archer

9-19-18
Date

LETTER OF SURRENDER
Michael Steven Archer, LICENSE NUMBER 05194

ACCEPTANCE

ON BEHALF OF THE MARYLAND BOARD OF OCCUPATIONAL THERAPY PRACTICE, on this 25th day of September, 2018, I accept MICHAEL STEVEN ARCHER public Letter of Surrender of his license to practice as an OCCUPATIONAL THERAPIST in the State of Maryland.

09/25/2018
Date

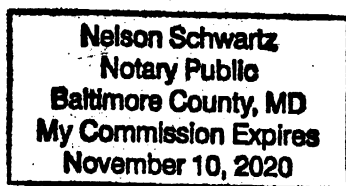
Wanda R. Banks, MA, OTR/L
Wanda Banks, Chairperson
Maryland Board of Occupational
Therapy Practice

NOTARIZATION

I HEREBY CERTIFY that on this 19 day of September 2018, before me, Notary Public of the State and City/County aforesaid, MICHAEL STEVEN ARCHER personally appeared, and made oath in due form of law that signing the foregoing Letter of Surrender was the voluntary act and deed of MICHAEL STEVEN ARCHER.

AS WITNESSETH my hand and notarial seal.

SEAL



My Commission Expires: 11/10/2020

[Signature]
Notary Public