# NEVADA STATE BOARD OF MASSAGE THERAPY

# AGENDA ACTION SHEET

# TITLE: <u>Application Review (Criminal History)</u>

MEETING DATE: July 1, 2020

APPLICANT: Jinping Chen REVIEW UNDER: NRS 640C.700

## **BACKGROUND INFORMATION:**

Ms. Chen's reflexology application is before you today due to potential criminal history that could not be approved administratively. Ms. Chen was arrested in August of 2005 for Burglary in Arcadia, California and in October of 2007 for Prostitution in Oakland, California. Ms. Chen plead Nolo for Burglary charge was given 36 months' probation. Prostitution charge was dropped to disorderly conduct due to insufficient evidence. No fines or fees or disposition available for charge. Ms. Chen is requesting to be granted a license under NRS 640C.400 or 420 and is before you today for review under NRS 640C.700. Staff's recommendation is to deny this application based on NRS.640C.700(3)(6) & (9).

## ACTION:

Approved Tabled Denied – NRS 640C.\_\_\_\_\_ Probationo

# PROBATION CONDITIONS: Per NRS 640C.710 Options for Respondent:

A. Report all contact with law enforcement personnel within 48 hours after such contact occurs.	B. Refrain from providing outcall services.
C. Submit employment offers to the staff of the Board for review and approval.	D. Submit to a random drug test at respondent's expense.
E. Complete an ethics course within 90 calendar days of licensure.	F. Submit to the Board a complete set of Fingerprints bi-annually/annually at licensee's expense.
G. Take any other action that the Board deems appropriate -	

# **Required for Respondent:**

Cooperate fully with Board staff to administrate term of probation.	Responsible for all administrative fees incurred by the Board as a result of their probation compliance
Attend Probation Orientation	Comply with all laws governing massage therapy
Notify any change in address, phone number, establishment or employment to the Board office within 10 calendar days per NAC.640C.085(3)	Take any combination of the actions set forth in paragraphs (a) through (g), inclusive.

Board Meeting Application review:

Summary of Jinping Chen arrests/charges:

8/7/2005 - Ms. Chen was arrested by Arcadia Police Department in Arcadia, CA for 1 count of burglary. According to documents presented by Ms. Chen and/or Attorney Kirk Kennedy, Ms. Chen plead nolo and was given a sentence of 36 months of probation.

10/19/2007 – Ms. Chen was arrested by Oakland Sherriff's office in Oakland, Ca for 1 count of prostitution. According to documents received, prosecution lacked evidence and the case was dropped to disorderly conduct.

10/12/2016 – Ms. Chen was cited by Compliance Inspector A. Clifford at Moon Massage In Las Vegas, for practicing without having acquired a license or with an expired license. Ms. Chen was given a fine of \$500.00 and an administrative fee of \$150.00. Amount of \$650.00 was paid on 11/9/2016.

08/26/2019 - Ms. Chen was cited by Compliance Inspector B. Smith at Pebble Spa in Las Vegas, for practicing without having acquired a license or with an expired license. Ms. Chen was given a fine of \$1,000.00 and an administrative fee of \$150.00. Amount of \$1,150.00 was paid on 09/12/2019.

Prepared by Tereza Van Horn, Executive Assistant

Ne		erapy		
	1755 E. Plumb Lane,	Sulte 252, Reno, NE	/ADA	
Application: License Application Application Number: OL190705100723			<b>Fee:</b> \$30.00	
APPLICATION INSTRUCTIONS				
Please read the following instructions cause delays in processing your applicatio website listed above and click the FAQs ta	n. If you have any ques			
<ol> <li>Did you complete/graduate from a pr</li> <li>Did you take and pass the National Ex ARCB, IIR and NCBTMB-R)? :</li> </ol>				
Section 1 : Personal Information				
Application Type : () Massag Applicant Name Last Name : CHEN First Name ; JINPING Middle Name ;	e Therapist 🦾 Struct	ural Integration เล	) Reflexology	
List all legal names previously or curr	ently being used by y	ou :		
No record found.				
Mailing address :				
Street :				
City :	State :	Zip ;		
Residence address (if different than t	he mailing address) :	📋 Same as mailin	g address	
Street :				
City : Social Security Number Place of Birth : China	State :	Zip : Date of Birth : Gender :	🔿 Male 🖲 Female	
Home/Cell Phone : Indicate the appropriate selection; wi Home () Mailing () Business	hich address you wou	ld prefer to be pub	lic knowledge.	
Do you want to be excluded from the notifications)	public mailing list? (S	Select one - You wi	ll still recelve Board	

#### Section 2 : Child Support Information (Pursuant to NRS 640C.430)

Mark the appropriate response (failure to mark one of the three will result in denial of your application):

I am NOT SUBJECT to a court order for the support of a child.

- I am SUBJECT to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.
- I am SUBJECT to a court order for the support of one or more children and am NOT in compliance with the order or am NOT in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.

#### Section 3 : Previous Licensure Information

#### **Previous Licensure :**

List all jurisdictions/states in which you have ever been licensed as a Massage Therapists, Reflexology or Structural Integrationist.

Check here if you have never been licensed in any state jurisdiction.

Licensure information is not required because you have checked "Sign off from Local jurisdiction to follow".

#### Section 4 : Training and Education

#### Training :

Contact registrar of your school/(s) and request to have official transcripts mailed directly to the Nevada State Board of Massage Therapy.

Diploma may be provided by school or applicant.

Name of School	City/State	Years from and to	Hours Completed
FUZUBA SCHOOL OF MASSAGE AND REFLEXOLOGY	LAS VEGAS	2019 - 2019	200

#### Transcript(s)

Document Name	User Defined Document Name	Document Link
190705100723-114354-Transcript.pdf	FUZUBA-TRANSCP	Document Detail

#### Section 5 : National Exam

NCBTMB National Exam Status : Pass Date Received : 09/20/20	Las Vegas, NV	08/24/20: Score Report Received 🕃	
	018	Score Report Received 🕻	2
Document Name	User Defined Docume	nt Name	Document Status
190705100723-113830-ScoreReportCard.	pdf NC	BTMB-R	Pass

#### Section 6 : Application Screening Questions

Please review the information you provided on this page carefully before submitting. Once saved and submitted, this cannot

	d any disciplinary proceedings instituted against you relating to your license to practice
Have you ever na massage, reflexo	logy or structural integration?
🔿 Yes 🔘 No	
If yes, add the d	sciplinary actions below.
No record found.	
Are you currently or structural inte nature of the litig	a party to any pending litigation related to the practice of massage therapy, reflexology gration? If yes, please indicate whether you are a plaintiff or defendant and describe the ation.
🔿 Yes 🍥 No	
	مهمه ويترشرون والمسترك والواسية الماسية المحمرية والمتواريك مراجع المراجع والمتراجع والمحمو بواسترك والمسترك والمسترك والمسترك
	or have you ever been required to register as a Sex Offender? (Tier I, II or III)
Are you currently Yes  No Yes, please expl	or have you ever been required to register as a Sex Offender? (Tier I, II or III)
Are you currently Yes () No Yes, please expl	or have you ever been required to register as a Sex Offender? (Tier I, II or III)
Are you currently Yes () No Yes, please expl	or have you ever been required to register as a Sex Offender? (Tier I, II or III)
Are you currently Yes (a) No Yes, please expl Have you been a practicing massa	or have you ever been required to register as a Sex Offender? (Tier I, II or III)
Are you currently Yes (a) No Yes, please expl Have you been a practicing massa person, including	or have you ever been required to register as a Sex Offender? (Tier I, II or III)
Are you currently Yes (a) No Yes (b) No Yes (c) No Yes (c) No Yes (c) No Yes (c) Made sey (c) Massage	or have you ever been required to register as a Sex Offender? (Tier I, II or III)
Are you currently Yes (a) No Yes (b) No Yes (c) No Yes (c) No Yes (c) No Yes (c) Made sey (c) Massage	or have you ever been required to register as a Sex Offender? (Tler I, II or III) ain in below textbox : ccused of, arrested for, engaged in or solicited sexual activity during the course of ge, reflexology, or structural integration on a person, with or without the consent of the , without limitation, if you were an applicant or holder of a license: ual advances toward the person; d sexual favors from the person; of the person is the person is the person is the person in the person is t
Are you currently Yes (a) No Yes (b) No Have you been a practicing massa person, including (a) Made sea (b) Requester (c) Massager signed a writing Yes (b) No	or have you ever been required to register as a Sex Offender? (Tier I, II or III) ain in below textbox : ccused of, arrested for, engaged in or solicited sexual activity during the course of ge, reflexology, or structural integration on a person, with or without the consent of the , without limitation, if you were an applicant or holder of a license: ual advances toward the person; d sexual favors from the person; of the person is t
Are you currently Yes (a) No Yes (b) No Have you been a practicing massa person, including (a) Made sea (b) Requester (c) Massager signed a writing Yes (b) No	or have you ever been required to register as a Sex Offender? (Tier I, II or III) and in below textbox : ccused of, arrested for, engaged in or solicited sexual activity during the course of ge, reflexology, or structural integration on a person, with or without the consent of the , without limitation, if you were an applicant or holder of a license: ual advances toward the person; d sexual favors from the person; or l, touched or applied any instrument to the breasts of the person, unless the person had ten consent form provided by the Board;

#### **Fingerprint Background Walver**

#### NOTICE OF NONCRIMINAL JUSTICE APPLICANT'S RIGHTS

As an applicant who is the subject of a Federal Bureau of Investigation (FBI) fingerprint-based criminal history record check for a noncriminal justice purpose you have certain rights which are discussed below.

- 1. You must be notified by the Nevada State Board of Massage Therapy that your fingerprints will be used to check the criminal history records of the FBI and the State of Nevada.
- 2. If you have a criminal history record, the officials making a determination of your suitability for the job, license or other benefit for which you are applying must provide you the opportunity to complete or challenge the accuracy of the information in the record. You may review and challenge the accuracy of any and all criminal history records which are returned to the submitting agency. The proper forms and procedures will be furnished to you by the Nevada Department of Public Safety, Records Bureau upon request. If you decide to challenge the accuracy or completeness of you FBI criminal history record, Title 28 of the Code of Federal Regulations Section 16.34 provides for the proper procedure to do so:

**16.34** - **Procedure to obtain change, correction or updating of identification records.** If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division, ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenge entry. Upon the receipt of an official communication directly from the agency which contributed the Information, the FBI CJIS Division will make any changes necessary in accordance with the Information supplied by that agency.

- 3. Based on 28 CFR § 50.12 (b), officials making such determinations should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- 4. You have the right to expect that officials receiving the results of the fingerprint-based criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal or state statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.
- 5. I hereby authorize Nevada State Board of Massage Therapy to submit a set of my fingerprints to the Nevada Department Public Safety, Records Bureau for the purpose of accessing and reviewing State of Nevada and FBI criminal history records that may pertain to me.

In giving this authorization, I expressly understand that the records may include information pertaining to notations of arrest, detainments, indictments, information or other charges for which the final court disposition is pending or is unknown to the above referenced agency. For records containing final court disposition information, I understand that the release may include information pertaining to dismissals, acquittals, convictions, sentences, correctional supervision information and information concerning the status of my parole or probation when applicable.

6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above.

Last Name :	CHEN		First Name :	JINPING
Middle Name :				
Street :				
City :	S	itate	Zlp :	
Date :	9/30/2019			
Submitting Agency I	Nevada State Board of Therapy	Massage	Address :	1755 E. Plumb Ln. Suite 252, Reno, NV 89502

#### VETERAN

The Nevada State Board of Massage Therapy is required by State Law to report veteran information annually. If this section applies to you, please complete the following information.

Have you ever served in the military: (3) Yes (6) No

Branch(es) of Service: (Check all that apply)

- Army/Army Reserve
- Marine Corps/Marine Corps Reserve
- Navy/Navy Reserve
- Air Force/Air Force Reserve
- Coast Guard/Coast Guard Reserve
- National Guard

Military Occupation Speciality/Specialities:

Date(s) of Service: From To

As by Excutive Order 2014-20 all professional licensing board organized pursuant to the NRS shall collect the above data and provide the information to the Nevada Department of Veterans Services.

Affidavit of Applicant / Authorization of Release

I, JINPING CHEN certify that I am the person described and identified in this application;

I have answered all the questions truthfully and completely, and any documents that I have provided in support of my application are, to the best of my knowledge, accurate.

I certify that I have not had any undisclosed disciplinary proceedings instituted against me relating to my license to practice massage, reflexology or structural integration and I have disclosed or have not been arrested or convicted, for any crime involving violence, prostitution or any other sexual offense.

I authorize all institutions or organizations, including educational institutions and organizations, employers (past and present), business and professional associations (past and present) and all governmental agencies and municipalities

(local, state, federal and foreign) to release to the Nevada State Board of Massage Therapy any information, files or : records required by the Nevada State Board of Massage Therapy in connection with processing this application. I understand that furnishing faise or misleading information or failing to furnish required information on this application may be cause for the denial, suspension or revocation of my license to practice massage therapy, structural integration or reflexology In the State of Nevada. Date: 9/30/2019 Name: Jinping Chen Upload Have you uploaded a current passport quality photo? Has our office received your Official School Transcripts, Certificate of Completion (diploma), National Exam Official Score Report and, If applicable, Certified Statement from other jurisdictions/states? (i) Yes () No Have you uploaded a current copy of driver's license or identification card and social security card. Names must match on driver's license and social security card. If your license has expired since you submitted your application you must include a current legible copy? ( Yes ( No Have you uploaded a current massage therapy license, reflexology license/certificate or structural Integration license. If your current massage therapist license, reflexology license/certificate or structural Integration license has expired since you submitted your application you must include a current legible copy? () Yes (i) No Please allow up to 4 weeks for processing your live scan fingerprints Please allow up to 6-8 weeks for processing fingerprint cards Once you have submitted your completed application, please allow up to 15 business days for processing before Inquiring about the status of your application. Defined User **Document Type Document Name Document** Name Government Issued ID Card OL190705100723-115467-Government-Issued-ID-Card.jpg 12625-115284-CHEN, JINPING.jpg Photo Live-Scan-Voucher-Live-Scan-Voucher-190705100723.pdf LiveScan 190705100723 FUZUBA-TRANSCP Transcript 190705100723-114354-Transcript.pdf 190705100723-114353-Certificate-of-Completion.pdf FUZUBA-DIPL Certificate of Completion NCBTMB-R Score Report Card 190705100723-113830-ScoreReportCard.pdf Social Security Card OL190705100222-113713-Social-Security-Card.pdf OL190705100222-113712-Government-Issued-ID-Card.pdf Government Issued ID Card **Application Fees** 

All fees are non-refundable.

Fee Detail(s)

Payment Detail(s)

Payment Method: Amount Pald:



# OFFICIAL TRANSCRIPT Professional Practice of Reflexology (200-Hour Course)

STUDE	ENT NAME:	Chen, Jinping	GENDER:F	<u>emale_</u> SSN <u>:</u>	
	OF BIRTH:				
START	DATE:	02/19/2019		N DATE:	07/05/2019
<u>UNIT</u>	SUBJE	<u>ECT</u>		HOURS	GRADE
A.	Reflexology	History, Theory and Scop	e of Practice	25	A-
В.		s of the Feet, Hands and I on and Treatment Methods		30	В
C.	Practical Ap	plications of Reflexology_		40	B-
D.		al Practice of Reflexology: thics and Business	Health, Safety,	15	В+
E.	Supervised	Practice		<u>90</u>	PASS

TOTAL HOURS: 200

FINAL GRADE: B

Qian Yang, CMT, Assistant Director

Date: 07-05-2019





www.ncbtmb.org | 1.800/296/0664 | into encbtmb.org

# **Official NCBTMB Score Report**

**JINPING CHEN** 

UNITED STATES

DOB:

Ø PASS

Exam Name: Reflexology Certificate Exam

Exam Date: 8/28/2018

Exam Result: PASS

Please accept this as the Official Score Report for the candidate listed above for the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB).

If you have any questions, please contact info@ncbtmb.org or call 630-652-0478.

NSEAT
SEP 2 0 2018
RECEIVED

The National Certification Board for Therapeutic Massage & Bodywork | 1333 Burr Ridge Pkwy, Ste 200. Burr Ridge, IL 60527

# Nevada Board of Massage Therapy

1755 E. Plumb Lane, Suite 252 Reno, NV 89502



Date	Invoice #
10/12/2016	851

Invoice

	Terms	Due Date
	Net 15	10/27/2016
Description		Amount
ministrative Fine-640C.910 Practicing without having acquired a license ministrative Fee		500.0 130.0
· ,		
	Total	\$650.0

, , , , ,	
Email: nvmassagebd@state.nv.us Website: http://massagetherapy.nv.gov	Nevada State Board of Massage Therapists 1755 E. Plumb Lane Suite 252 Reno, NV 89502 ' Phone (775) 687-9955 Fax (775) 786-4264
Name: JINPING CHA	ime: 1533hes
Mailing Address: City: S Phone Number:	State: Zip:
Establishment Name: MOON Dear_MS. CHEN	Massage

Enclosed is an Administrative Citation issued pursuant to NRS 640C for one or more violations related to the practice of Massage Therapy. Please comply with the Citation by exercising one of the following options within 15 business days from the date of issuance:

- You may remit a copy of the Citation and a cashier's check or money order in the amount of the fine stated on the Citation to: Nevada State Board of Massage Therapists, 1755 E. Plumb Lane, Suite 252, Reno, NV 89502.
- 2. You may submit a written request to the Board for approval of a fine payment schedule to the address listed in Option 1.
- 3. You may appeal the issuance of the Citation by submitting a written request to the Board at the address listed in Option 1. The Board will hear your appeal at its earliest convenience. You will be notified of the time and place of hearing by Registered or Certified mail to your last known mailing address. It is your responsibility to keep the Board apprised of your current mailing address.

Failure to comply with one of the above options may result in a referral to a Collection Agency, and/or denial of your Application for Nevada State Massage Therapist Licensure. This Administrative Citation shall not be construed as excluding or reducing any Criminal or Civil penalties or Sanctions or other remedies that may be applicable under Federal, State or Local laws and may be referred to the Nevada Attorney General's office to pursue action.

Sincerely. Afiarina Clifford Compliance Inspector I

# **NEVADA STATE BOARD OF MASSAGE THERAPISTS CITATION**

THE NEVADA STATE BOARD OF MASSAGE THERAPISTS HEREBY ISSUES THE GINAL **CITATION TO:** 

DL/ID # SS# D.O.B.

THE UNDERSIGNED NEVADA STATE BOARD OF MASSAGE THERAPISTS

REPRESENTATIVE HEREBY DECLARES UNDER PENALTY OF PERJURY, THAT ON OR

7,2016 AT 1533hes AT ABOUT UCT

3335 Kietzke LN. Romo NU 89502 Ionn Massage THE ABOVE NAMED PARTY DID ENGAGE IN THE FOLLOWING ACTIVITY, TO WIT:

640C.910 Practicing Without Having Acquired a License or With an Expired License

640C,930 Advertising Without a License or with an Expired License

640C.450 Practicing Without Display of Original License

NAC 640C.350 Advertising Without License Number

NAC 640C.200 to NAC 640C.310 Sanitation Violation

NAC 640C.360 to 640C.410 Standards of Practice & Unprofessional Conduct

NAC 640C.230(2) Domestic Purposes

640C.700(12) On Probation Working Without Supervising LMT Present

You are further ordered to Cease and Desist from any and all activity that relates to the practice of Massage Therapy and requires a license pursuant to NRS640C. Failure to immediately Cease and Desist from any and all activity that relates to the practice of Massage Therapy may result in your being cited for additional violations.

Pursuant to NRS 640C, you may appeal the finding of this violation of NRS 640C by written request to the Nevada State Board of Massage Therapists within 15 business days after the date of issuance of this Citation.

Pursuant to NRS 640C,710, the Board shall assess Administrative Fines and Fees for violation of NRS 640C:

Administrative Fines	Administrative Fee
1. \$ 500 for the first violation of	
2. \$ for the second violation of	\$150.00
3. \$ for the third and each subsequent violation of	

I. Christy Brunner, a representative of the Nevada State Board of Massage Therapists, hereby issue this Citation to the above named party for the described violation and for a fine, and an administrative and investigation fee in the total amount of \$ 650 9 due and payable within 15 business days

Jill SIGNATURE

SIGNATURE OF REPRESENTATIVE Arlanna Clifford

PRINT NAM

DATE

PRINT NAME

Nev	ada Boa	rd of Massage	Therapy		
	5 E. Plum o, NV 895	b Lane, Suite 25 502	52	-585	9/4
	Phone #	775-687-9955			
Bill To				201	
Jinping Chen			Qdi		

# Invoice

Date	Invoice #
9/4/2019	1004

	Terms	Due Date
	Net 15	9/19/2019
Description		Amount
Administrative Fine - Violation of NRS.640C.910 (1)(b) - Prohibited activities without a license Administrative Fee		1,000.0 150.0
	Total	\$1,150.0

CIT #19012 * 19 JacuasesOther	_ ۲. <b>۸۷</b>	ſ			21123 VN1	DECLARES UNDER TO WIT:	. Total.																		1000.00			lates to the practice ARS640C. Fallure to	rrapy, reflexology or amed party for the	Itso mai	8-26-49	1			
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CIT #1 Ctation Date: 8/ 2/ 19 Time: 3:200/		ź	3		Avethol	RESENTATIV	Offense/Fine:	. Second	\$500		\$500	\$500	\$500	\$500	\$500	\$500	\$500	\$500	\$500	052\$	S2000	\$500	\$500	\$2000	0002\$	\$2000	\$1500	y and all activ i license pur	practice of m C Itation to the			VSBM1 Representative and Date	Int Name	PINK: BILL	
Citatio Time:					em A	ERAPY REP AGE IN THE		First	002\$		\$200	\$200	\$200	\$200	\$200	\$200	\$200	\$200	2200	\$100	21000	\$200	\$200	00015	COOT\$	\$1000	\$500	ist from an requires a	thes to the p d violations mee this cl	8			Print Name	PTENT / 1	
tane 1200	Name: Jinping Chen DL/ID:	Home Address:	Inditent Date: 8.26-19	Business Name: Perble Space	Business Address. 0844 S. Easter	THE UNDERSIGNED NEVADA STATE BOARD OF MASSAGE THERAPY REPRESENTATIVE HEREBY DECLARES UNDER PENALTY OF PERUIRY THAT THE ABOVE-NAMED PARTY DID ENGAGE IN THE FOLLOWING ACTIVITY, TO WIT:	Violation	NAC/NRS Code	NAC 640C-200 Facilities	NAL BAUL ZIN LIN HAILS	NAC 640C/230 Room	NAC 640C.240 Linens	NAC 648C 250 Clothing	NAC 640C.250 Water	NAC 640C.270 Baching facilities	NAC 640C.280 Sewage	NAC 640C.290 Garbage	NAC 640C.300 Lavatories	NAC 640C.310 Duties/Licensee	NAC 640C350 Advertisements - Licensees	NAC 640C 400 Sextial Activity resource	NRS 640C 450 LICENSE DISplay	NRS 640C-500.License Expiration	NRS 640C.700 Grounds/disciplinary action	Mirs640C.910(1)(b) and/or(c) or (2)(b) and/or(c) Prohibited Activities without license	NRS 640C-920 Unlawful acts/licenses	NRS 640C.700(14) or 930 Unlawful acts/advertising	Cease and Danist You are further ordered to Cease and Desist from any and all activity that relates to the practice of massage therapy, reflexology or structural integration and requires a license pursuant to NRS640C. Fallure to	limmediately Cesse and Desist from any and all activity that relates to the practice of massage therapy, reflexology or structural integration mayreautifs nyour being cibed for and ditional violations. The Neurala State Reard of Massare Tisersury invertiv for this chick of this chicken to the abrove-named variv for the	ne and admi	amount due and payable within 15 business days. (Sect.4 of 1.CB File RTUB-12)	Signature and Date	Print Name	WHITE: OFFICE/CANARY: RECIPIENT/PINK: BILLING	

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Nevada State Board of Massage Therapy 1755 E. Plumb Lane Suite 252 Reno, NV 89502 Phone (775) 687-9955 Fax (775) 786-4264 Email: <u>nvmassagebd@state.nv.us</u> Website: <u>http://massagetherapy.nv.gov</u>

October 21, 2019

Jinping Chen

Re: DISPOSITION OF RECORD

Dear Ms. Chen,

In order to complete your application and obtain your Nevada State Board of massage therapy license, we need to have the following documents to continue processing your application;

- 1. A written narrative describing the incident(s), the circumstances that led up to the incident(s) and the outcome of the incident(s).
- Receipts for all fines or penalties showing that they have been paid. You will need to contact the court you attended or appeared at. Online printouts cannot be accepted.
- 3. Dispositions from the court(s) you appeared at regarding the arrest dates. Online printouts cannot be accepted.
- 4. You must comply with Board Staff for all requested documents and the Board Staff will be making recommendations regarding your Application.

Your background check will expire on **03/30/2020**. Your massage license must be completed and issued by the above expiration date, or you will be required to fulfill another background check and be responsible for the additional \$85.00 fee.

If you have any questions regarding the attached criminal history, you can email us at nvmassagebd@state.nv.us

Tereza Van Florn Executive Assistant Enclosed

Please Note: It is a misdemeanor to practice or advertise Massage Therapy without a current valid NSBMT Massage License.



*VIA FACSIMILE TO:* 775-786-4264

October 28, 2019

Tereza Van Horn Executive Assistant Nevada State Board of Massage Therapy 1755 E. Plumb Lane, Ste. 252 Reno, NV 89502

RE: Jinping Chen Reflexology License Application

Dear Ms. Van Horn:

Please be advised that I am counsel for Ms. Jinping Chen for her pending reflexology license application. I will be assisting Ms. Chen with her response to the Board's inquiry regarding her criminal history. Kindly forward any communication regarding this matter to my office. Thank you.

Yours truly Kirk T. Kennedy, Esq KTK/pf





March 6, 2020

Tereza Van Horn Executive Assistant Nevada State Board of Massage Therapy 1755 E. Plumb Lane, Ste. 252 Reno, NV 89502

RE: Application of Jinping Chen - Reflexology License

Dear Ms. Van Horn:

Since early November, 2019, I have made attempts to obtain copies of any police/court records related to Ms. Jinping Chen's criminal history in California. After many roadblocks and unresponsive letters from various California agencies, I have been able to obtain a copy of some limited records related to her 2005 burglary arrest. See Attached. The 2005 case was resolved to a misdemeanor theft charge and she received a probation sentence of 36 months supervision.

Regarding her remaining California criminal history, I have not been able to secure any additional records. Given the status of this matter, I would request that the Massage Board proceed to set her application for a review hearing at the next available agenda setting. Thank you for your cooperation.

Yours truly,

Kirk T. Kennedy, F

Enc.





Nevada State Board of Massage Therapy 1755 E. Plumb Lane Suite 252 Reno, NV 89502 Phone (775) 687-9955 Fax (775) 786-4264 Email: nvmassagebd@state.nv.us Website: http://massagetherapy.nv.gov

March 13, 2020

Kirk Kennedy 815 S. Casino Blvd. Las Vegas, NV 89101

Re: Jinping Chen – Disposition of Record

Dear Mr. Kennedy,

In order to complete Ms. Chen's application, we need to have the following documents to continue processing the application:

- 1. A written narrative describing the incident(s), the circumstances that led up to the incident(s) and the outcome of the incident(s) for Ms. Chen's arrests.
- 2. You must comply with Board Staff for all requested documents and the Board Staff will be making recommendations regarding your Application.

Ms. Chen's background check will expire on **03/31/2020**. Ms. Chen's reflexology license must be completed and issued by the above expiration date, or she will be required to fulfill another background check and be responsible for the additional \$85.00 fee.

If you have any questions regarding the attached criminal history, you can email us at nymassagebd@state.ny.us

Sincerely. Tereza Van Horn

Executive Assistant



1755 E. Plumb Lane Suite 252 Reno, NV 89502 Phone (775) 687-9955 Fax (775) 786-4264 Email: <u>nvmassagebd@state.nv.us</u> Website: http://massagetherapy.nv.gov

## WAIVER OF OPEN MEETING LAW SERVICE REQUIREMENTS

First Name MI Last Name, the undersigned, being apprised

of the requirements under NRS 241.033 and NRS 241.034 for a public body to notify a person by certified mail 21 working days in advance or by personal service 5 working days in advance of a meeting in which that public body will consider that person's character, professional competence, or physical or mental health or take administrative action against that person, knowingly and voluntarily waive these service and notification requirements as to the undersigned for (an) agenda item(s) pertaining to the undersigned at the meeting of the Nevada State Board of Massage Therapy set for 9:00 a.m. on Wednesday, June 10, 2020, via Zoom:

Register in advance for this meeting: https://zoom.us/meeting/register/LJcafmhgTguGNYc09MgVYIIK-5pMzMN9Oag After registering, you will receive a confirmation email containing information about joining the meeting.

MI

First

Meeting ID 914-0777-9129 Password 564860 Dated this \_\_\_\_\_ day of \_\_\_\_ 2020. Impis Chen Signature



### Nevada State Board of Massage Therapy

1755 E. Plumb Lane Suite 252 Reno, NV 89502 Reno Phone (775) 687-9955 Fax (775) 786-4264 Email: <u>nvmassagebd@state.nv.us</u> Website: <u>http://massagetherapy.nv.gov</u>

May 20, 2020

Jinping Chen C/O Kirk Kennedy 815 S. Casino Center Blvd. Las Vegas, NV 89101

Re: Notice of meeting of the Nevada State Board of Massage Therapy to consider your character, alleged misconduct, competence, or physical or mental health.

Dear Ms. Chen:

In connection with your Application Review, the Nevada State Board of Massage Therapy (Board) may consider your character, alleged misconduct, competence or physical or mental health at its meeting on June 10, 2020. Pursuant to Governor Steve Sisolak's Emergency Directive 006, there will be no physical location for this meeting. Participants can join the meeting via Zoom. The meeting will begin at 9:00 a.m:

Register in advance for this meeting:https://zoom.us/meeting/register/tJcqf-mhqTguGNYc09MqVYIiK-5pMzMN9OagAfter registering, you will receive a confirmation email containing information about joiningthe meeting.Meeting ID914-0777-9129Password564860

The meeting is a public meeting. You are not required to attend; however, attendance is recommended. Pursuant to NAC 640C.070 your completed investigation results may be discussed. You may choose to have an attorney or other representative of your choosing present during the meeting, present written evidence, provide testimony, present witnesses relating to your character, alleged misconduct, professional competence, or physical or mental health. Please be aware you are one of many agenda items, and the Board may take items out of order. The meeting may last until 4:30 p.m.

If the Board determines it necessary, after considering your character, alleged misconduct, professional competence, or physical or mental health whether in a closed meeting or open meeting, it may take administrative action against you at this meeting. This informational statement is in lieu of any notice that may be required pursuant to NRS 241.034. This notice is provided to you under NRS 241.033.

In the event you need an interpreter, please provide one at your own expense.

If you have any questions, please feel free to contact the office at (775) 687-9955.

Sincerely,

Executive Director Cc: Kirk T. Kennedy 9489 0090 0027 6226 3396 78



Nevada State Board of Massage Therapy 1755 E. Plumb Lane Suite 252 Reno, NV 89502 Phone (775) 687-9955 Fax (775) 786-4264 Email: <u>nvmassagebd@state.nv.us</u> Website: <u>http://massagetherapy.nv.gov</u>

# WAIVER OF OPEN MEETING LAW SERVICE REQUIREMENTS

Kirk Kanned the Sinping Chen, the undersigned, being apprised MI Last Name

of the requirements under NRS 241.033 and NRS 241.034 for a public body to notify a person by certified mail 21 working days in advance or by personal service 5 working days in advance of a meeting in which that public body will consider that person's character, professional competence, or physical or mental health or take administrative action against that person, knowingly and voluntarily waive these service and notification requirements as to the undersigned for (an) agenda item(s) pertaining to the undersigned at the meeting of the Nevada State Board of Massage Therapy set for 9:00 a.m. on Wednesday, July 1, 2020, via Zoom:

# https://zoom.us/i/7991196295?pwd=SnY2ak5yUnB5eUJHbFNuaTdjZkx6Zz09

After registering, you will receive a confirmation email containing information about joining the meeting.

 Meeting ID
 7991196295

 Password
 257161

 SIP
 7991196295@zoomcrc.com

Join by phone: US : +1 669 900 6833 or +1 253 215 8782 or +1 346 248 7799 or +1 929 205 6099 or +1 301 715 8592 or +1 312 626 6799

7 day of Dated this 2020. Signature Vich Kenne First MI



## Nevada State Board of Massage Therapy

1755 E. Plumb Lane Suite 252 Reno, NV 89502 Reno Phone (775) 687-9955 Fax (775) 786-4264 Email: <u>nvmassagebd@state.nv.us</u> Website: <u>http://massagetherapy.nv.gov</u>

July 17, 2020

Jinping Chen C/O Kirk Kennedy 815 S. Casino Center Blvd. Las Vegas, NV 89101

Re: Notice of meeting of the Nevada State Board of Massage Therapy to consider your character, alleged misconduct, competence, or physical or mental health.

Dear Ms. Chen:

In connection with your Application Review, the Nevada State Board of Massage Therapy (Board) may consider your character, alleged misconduct, competence or physical or mental health at its meeting on August 19, 2020. Pursuant to Governor Steve Sisolak's Emergency Directive 006, there will be no physical location for this meeting. Participants can join the meeting via Zoom. The meeting will begin at 9:00 a.m:

Register in advance for this meeting:https://zoom.us/i/98844482882?pwd=YnVWeHBaMEtWZWFNZmdJRXRwYlpqQT09After registering, you will receive a confirmation email containing information about joiningthe meeting.Meeting ID988-4448-2882Password246012

The meeting is a public meeting. You are not required to attend; however, attendance is recommended. Pursuant to NAC 640C.070 your completed investigation results may be discussed. You may choose to have an attorney or other representative of your choosing present during the meeting, present written evidence, provide testimony, present witnesses relating to your character, alleged misconduct, professional competence, or physical or mental health. Please be aware you are one of many agenda items, and the Board may take items out of order. The meeting may last until 4:30 p.m.

If the Board determines it necessary, after considering your character, alleged misconduct, professional competence, or physical or mental health whether in a closed meeting or open meeting, it may take administrative action against you at this meeting. This informational statement is in lieu of any notice that may be required pursuant to NRS 241.034. This notice is provided to you under NRS 241.033.

In the event you need an interpreter, please provide one at your own expense.

If you have any questions, please feel free to contact the office at (775) 687-9955.

Sincerely Sandra J.

Executive Director Cc: Kirk T. Kennedy

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