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@lmt.nv.gov
Website: http://massagetherapy.nv.gov

NSBMT
AUG 05 2025
RECEIVED

TERMINATION OF PROBATION

Please type or print legibly all portions of this application for termination of probation. Please complete this document in its entirety and return the original to the Nevada State Board of Massage Therapists at the address shown above. Use N/A for items not applicable. Incomplete applications will not be processed.

Applicant Name Last	First	Middle Initial
Williams	Meaghan	M

List all other names previously or currently being used by you

Residence address (do not list Post Office boxes or mailbox drop addresses) Street	City	State	Zip
	Las Vegas	NV	89144

Residence address (if less than 1 year) Street	City	State	Zip
n/a	n/a	n/a	n/a

Mailing address (if different than the residence address) Street or PO Box	City	State	Zip
n/a	n/a	n/a	n/a

Business Name:			
n/a	n/a	n/a	n/a

Business Address Street	City	State	Zip
n/a	n/a	n/a	

Home Phone	Cell Phone	Business Phone	Gender Male	Female
				✓

Social Security Number	Date of Birth	Place of Birth
		—

Application Screening Questions (use additional sheets of paper if needed)

☐ Yes ☑ No

1. Have you ever had any disciplinary proceedings instituted against you relating to your license to practice massage?

If yes, complete the following:

Date of Revocation/suspension/surrender/ or any other disciplinary action: _____

Licensing Agency/jurisdiction that took action: _____

Name and Address of Employer/supervisor: _____

Reason for action: _____

☐ Yes ☑ No	2. Have you ever been arrested or convicted, within the 10 years immediately preceding submission of this application, of a felony or for any crime involving violence, prostitution or any other sexual offense? If yes, complete the following: Date of Charge/offense: _____ Name and Address of Law Enforcement Agency: _____ _____ Charge: _____ Disposition: _____
☐ Yes ☑ No	3. Do you currently use any chemical substances that would in any impair or limit your ability to practice the full scope of massage? If yes, you must submit: a. A letter of explanation that addresses the impairment or limitations of practice b. A letter of reference from you current/last employer c. A copy of your last employment evaluation d. If you are using the chemical substance as a confirmed medical necessity, a letter from your treating practitioner documenting the diagnosis and medical necessity for the use of chemical substances, including any practice limitations.
☐ Yes ☑ No	4. Are you currently in recovery for chemical dependency, chemical abuse or addiction? If yes, you must submit: a. A letter of explanation describing your recovery experience, including length of continuous recovery, treatment, and current recovery activities b. Documentation from knowledgeable individual(s) documenting your length of sobriety c. Documentation of inpatient or outpatient chemical dependency treatment.
☐ Yes ☑ No	5. Do you currently have a medical or psychiatric/mental health condition which in any way impairs or limits your ability to practice the full scope of massage? If yes, you must submit: a. A letter of explanation regarding your condition, whether temporary or permanent, including diagnosis, past hospitalizations, date of last treatment, current treatment plan, and how your condition my interfere with your ability to practice the full scope of massage safely b. Documentation from treating practitioner regarding the diagnosis, (Axis I-V for psychiatric diagnosis), medications, current status and treatment plan, the extent of condition, and statement regarding your ability to carry out massage duties reliably and with good judgment.

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Affidavit of Applicant / Authorization of Release

I, Meghan Williams, 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 authorize all institutions or organizations, including educational institutions and organizations, my references, 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 Therapists any information, files or records required by the Nevada State Board of Massage Therapists in connection with processing this application for termination of Probation.

I understand that furnishing false 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 in the State of Nevada.

Signature of Applicant: MWilliams Date: 7-31-25

State of NEVADA
County of CLARK

Signed and sworn to before me this 31 day of JULY 2025 by MEAGHAN MIKESHA WILLIAMS, who personally appeared before me.

Royann LiBerti
Notary Public Signature

04/17/2027
Notary commission expiration date

Notary Public - State of Nevada
COUNTY OF CLARK
ROYANN LIBERTI
My Appointment Expires
APRIL 17, 2027
No. 23-4883-01

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Outlook

Re: Application Status Check

From Nevada Board of Massage Therapists <nvmassagebd@lmt.nv.gov>
Date Tue 8/12/2025 4:10 PM
To Real estate Wiz

Hello,

We have received the request . It will go to the Board for review. Our next Board meeting is scheduled for 10/22/2025.

Elisabeth Barnard
Executive Director
Nevada State Board of Massage Therapy
1755 E. Plumb Lane, #252
Reno, NV 89502
775.687.9955
https://massagetherapy.nv.gov/

From: Real estate Wiz
Sent: Monday, August 11, 2025 12:52 PM
To: Nevada Board of Massage Therapists <nvmassagebd@lmt.nv.gov>
Subject: Application Status Check

Hi I'm requesting a check on meaghan Williams request for termination of probation recently sent in notarized. Thank you for your time and efforts I have all info needed thank you
Sent from my iPhone

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October 2, 2025

Meaghan M. Williams

Las Vegas, NV 89144

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. Williams,

In connection with your request for termination of probation, the Nevada State Board of Massage Therapy (Board) may consider your character, alleged misconduct, competence or physical or mental health at its meeting on October 22, 2025. Participants can join the meeting via Zoom by using the website below, via telephone by dialing one of the numbers below, or by visiting 1755 E. Plumb Ln., Ste 254, Reno, NV 89502. The meeting will begin at 9:00 a.m.:

You may access the meeting by going to our meetings page and following the link to the next scheduled meeting at: https://massagetherapy.nv.gov/ then find the posted Zoom link.

Zoom sign-in available at 8:30 a.m.
Virtual access is available by registering for this meeting online:
https://us06web.zoom.us/j/84159636052?pwd=b8LkkWLpWMINUJwcQgju90MJIH6cgG.1

Meeting ID: 841 5963 6052
Passcode: 929477

SIP • 84159636052@zoomcrc.com

Or go to https://massagetherapy.nv.gov/ and follow the link for our next scheduled meeting.

Telephonic access to this meeting available by dialing the number below based on the location closest to participant:

- +1 253 215 8782 US (Tacoma)
- +1 346 248 7799 US (Houston)
- +1 669 444 9171 US
- +1 669 900 6833 US (San Jose)
- +1 719 359 4580 US
- +1 253 205 0468 US
- +1 386 347 5053 US
- +1 507 473 4847 US

• +1 564 217 2000 US
• +1 646 931 3860 US
• +1 689 278 1000 US
• +1 929 205 6099 US (New York)
• +1 301 715 8592 US (Washington DC)
• +1 305 224 1968 US
• +1 309 205 3325 US
• +1 312 626 6799 US (Chicago)
• +1 360 209 5623 US

Meeting ID: 897 7802 0789
Passcode: 908314

Physical Location: 1755 East Plumb Lane, Suite 254, Reno, Nevada 89502

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.

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.

If you require an interpreter, please notify us by October 15, 2025, so that one may be scheduled at no cost to you.

If you have any questions, please feel free to contact the office at (775) 687-9955 or by emailing nvmassagebd@lmt.nv.gov.

Sincerely,

Elisabeth Barnard
Executive Director

BEFORE THE NEVADA STATE BOARD OF
MASSAGE THERAPY

In the Matter of:

Meaghan M. Williams,
Licensed Massage Therapist
License No. NVMT.11469

ORDER FOR PROBATION

IT APPEARING on June 8, 2022, MEAGHAN M. WILLIAMS ("Williams") appeared before the Nevada Board of Massage Therapy ("Board") for disciplinary action.

The Board placed Williams' license on probation for a period of four (4) years.

ORDER

IT IS HEREBY ORDERED:

1. Williams will attend probation orientation.
2. Williams must report all contact with law enforcement personnel within forty-eight (48) hours after such contact occurs.
3. Williams must work for an employer.
4. Williams must notify the Board of employer within 10 calendar days per NAC.640C.085(3).
5. Williams must submit to the Board a complete set of fingerprints biennially at renewal period at licensee's expense.
6. Williams must cooperate fully with the Board staff to administrate terms of her probation.
7. Williams is responsible for all administrative fees incurred by the Board as a result of her probation compliance.
8. Williams is to comply with all laws governing massage therapy.
9. This order shall not be construed as excluding or reducing any criminal or civil penalties or sanction or other remedies that may be applicable under federal, state, or local laws.
10. Williams' license shall be marked "Restricted" throughout the probationary period.
11. Williams shall meet with the Board or its representatives upon request and shall cooperate with representatives of the Board in her supervision and investigation of Williams' compliance with the terms and conditions of this Order.

12. This Order will become part of Williams' permanent record, will become public information, will be published with the list of disciplinary actions the Board has taken, and may be reported to any national repository which records disciplinary action taken against licensees or holders of certificates or any agency or another state, which regulates the practice of massage therapy. The Board may use the Order in any subsequent hearings.
13. Williams acknowledges that if she violates one or more of the terms of this Order, the Board may revoke or invoke other appropriate discipline against her license to practice massage therapy; subject only to the requirement that the Board shall, prior to such disciplinary action, conduct a hearing in accordance with Chapters 233B, 622A, and 640C of the Nevada Revised Statutes for the limited purpose of establishing that there has, in fact, been a violation of the requirements of this Order. In the event that a violation of this Order is alleged, Williams agrees to surrender her license to the Executive Director, if so requested, and refrain from practicing as a massage therapist until an entry of a final order of the Board or a court of competent jurisdiction, whichever last occurs, regarding the potential violation. Williams agrees to waive her right to appeal the substantive legal basis of the disciplinary action. In the event an alleged violation of this Order is taken to hearing and the facts which constitute the violation are determined to be not proven, no disciplinary action shall be taken by the Board.
14. In the event other misconduct is reported to the Board, this Order may be used as evidence against Williams to establish a pattern of behavior and for the purpose of proving additional acts of misconduct.
15. Nevada State Board of Massage Therapy retains jurisdiction in this case until all conditions have been met to the satisfaction of the Board.

NEVADA STATE BOARD OF MASSAGE THERAPY

Elisabeth Bernard, LMT
Board Chair

6/23/2022
Date

Sandra Anderson
Executive Director

June 23, 2022
Date