

# **COMPLAINT FORM**

This form must be used if you want to make a complaint under the ICTSA complaints procedure. The following information is intended to assist you before completing the complaint form. The ICTSA Complaints & Disciplinary Process is available on www.ictsa/rules/ictsa

### Who may make a complaint?

A complaint may be made by:-

- 1. by a member of the ICTSA on their own behalf
- 2. by a member of the ICTSA on behalf of a minor, where the complainant is the parent or guardian of the minor
- 3. by a non-member witnessing misconduct by a member of the ICTSA at an official event

This person is referred to as a Complainant.

#### How do you make a complaint?

Email the form below to <a href="mailto:honsec@ictsa.ie">honsec@ictsa.ie</a>

Please note that you must lodge a fee of €100 with the Honorary Secretary before the complaints process can begin. If there are sufficient grounds for investigation the fee will be refunded.

#### **Additional information**

Any incomplete complaint form's will be returned to the complainant <u>once</u> for completion. Incomplete complaint forms received after that will not be entertained but the fee will be retained.

## COMPLETE PART 1A WHERE YOU ARE MAKING A COMPLAINT ON YOUR OWN BEHALF

OR

## PARTS 1A & 1B WHERE YOU ARE MAKING A COMPLAINT ON BEHALF OF A MINOR COMPLAINANT

# PART 1A: PERSONAL INFORMATION

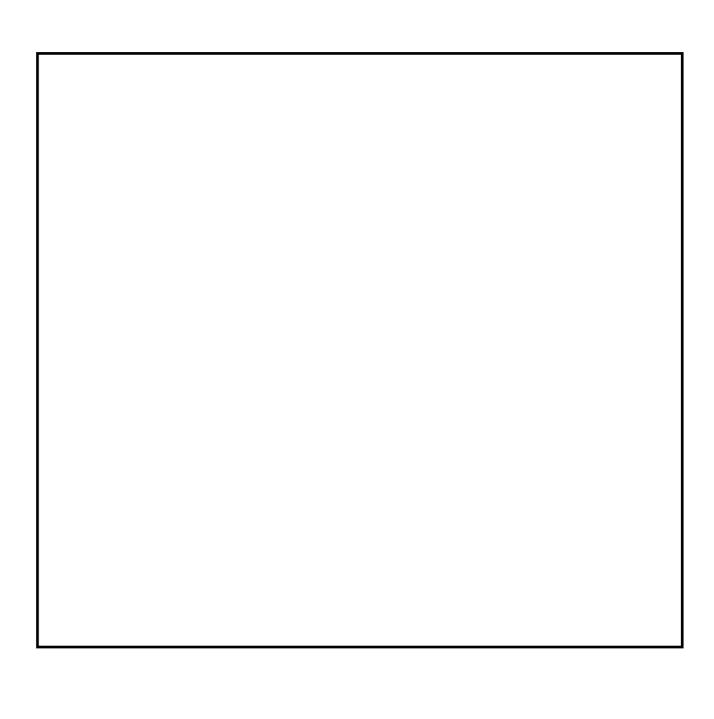
rorename	Insert Complainant's Forename
Surname*	Insert Complainant's Surname
Address*	Insert Complainant's Address
Phone number	Insert Complainant's Phone No.
Email address*	Insert Complainant's email address
ICTSA	
Membership	Insert Complainant's email address
Number*	
Minor's Forename	e*  Insert Complainant's Forename
Minor's Surname	Insert Complainant's Surname
Minor's ICTSA Vlembership#	Insert Complainant's email address
	making the complaint as the parent or guardian of the Complainant who is a being a person aged under 18 years.
Signa	ature:

## **PART 2: DETAILS OF THE COMPLAINT**

Name of the member complained of * Member's Name and Membership Number
Place where the alleged misconduct occurred *
Insert the location if applicable
Date and time of the alleged misconduct complained of *
Insert Date and, where applicable, the relevant time

Details of the Complaint \*

Include sufficient supporting information to enable a determination if there are sufficient grounds for an investigation (use additional pages if necessary):



☐ I confirm that I am aware of the ICTSA disciplinary rules & procedures
☐ I confirm that I am aware that the particulars of complaints made are confidential
☐ By submitting this complaint form, I agree to follow the ICTSA complaints procedure as laid out in the Complaints and Disciplinary Process.
I declare that the particulars in this form are correct:
Signed* By Complainant where Part 1A completed By Representative where Part 1B completed