

PENNSYLVANIA

CERTIFICATION BOARD

ETHICS COMPLAINT FORM – READ DIRECTIONS CAREFULLY

This form is to be completed by any person/agency/organization filing a complaint with the PA Certification Board concerning a certified professional or an applicant for certification.

PART 1

Name of Person Filing Complaint: _____

Cell Phone: _____ Email: _____

Home City: _____ Zip: _____

Agency Name: _____

Agency City: _____ Zip: _____

Name of the certified professional or applicant for certification against whom the complaint is being filed:

Name: _____

Street Address: _____

Home City: _____ Zip: _____

Cell Phone: _____ Email: _____

Credential(s) held by certified professional, if known:

- | | | |
|---|-------------------------------------|---|
| <input type="checkbox"/> AAC | <input type="checkbox"/> CRS | <input type="checkbox"/> CPS - prevention |
| <input type="checkbox"/> CAAC | <input type="checkbox"/> CPS – peer | <input type="checkbox"/> CCSM |
| <input type="checkbox"/> CADC | <input type="checkbox"/> CFRS | <input type="checkbox"/> CCMS |
| <input type="checkbox"/> CAADC | | <input type="checkbox"/> CIP |
| <input type="checkbox"/> CCDP | | <input type="checkbox"/> CAAP |
| <input type="checkbox"/> CCDP Diplomate | | <input type="checkbox"/> CCHW |
| <input type="checkbox"/> CCJP | | |
| <input type="checkbox"/> CCS | | |

PART 2

Please describe in as specific detail as possible the facts, circumstances, situations, dates, and allegations concerning the complaint. Additional pages may be added if necessary. Do not include client identifying information in your description.

PART 3

Submit all relevant documents, as attachments, that will support the allegation(s) in your complaint. Complaints submitted as hearsay and without appropriate evidence may be dismissed as unfounded.

Have you attached additional documentation to this form?

Yes No

If yes, does any of the documentation contain confidential information protected by HIPAA or other confidentiality law?

Yes No

If yes, have you attached a copy of a client consent release form or redacted confidential identifying information?

Consent Form Redacted Confidential Identifying Information

PART 4

All complaints must be filed within four years from date the offense occurs. A certified professional is required to file a complaint within 90 days. To determine if you have registered a complaint in a timely manner, the following information is requested:

On what date(s) did the action or complaint occur?

When were you first aware of the matter about which you are complaining?

PART 5

If you know of others who have first-hand knowledge of the alleged conduct, please provide the following information about them. Clients should not be listed unless including signed consents.

Name: _____

Relationship to Complainant _____

Cell Phone: _____ Email: _____

Has the person against whom the complaint is being filed given you any explanation for such alleged conduct? If yes, please state all such explanations:

How do you view the explanation(s) given to you?

PART 6

Have you filed this complaint with any governing agency or organization? If yes, please list the name of the agency and date filed?

Have you pursued resolution of your complaint through any internal grievance procedures of an institution or agency? If yes, what is the status of your complaint?

PART 7

I understand that the person against whom the complaint is being filed will be informed of this formal complaint process, will be given a copy of the complaint and supporting evidence, and will be given the opportunity to submit rebuttal information and/or materials concerning the complaint.

In filing an ethics complaint, the Executive Director may, at their discretion, proceed with an investigation even if the complainant subsequently requests that the complaint be withdrawn.

I have completed the PCB Complaint Form to the best of my knowledge and am willing to participate in a full investigation of all allegations noted in the complaint.

I, (print name) _____
attest that the information contained herein is true and correct.

Signature

Date

Please make a copy of this entire document and any attachments for your records. Complaints may be mailed, faxed, or emailed to PCB as follows (**choose only one method below**):

Mail

Pennsylvania Certification Board
298 S. Progress Avenue
Harrisburg, PA 17109

Email

info@pacertboard.org

Fax

717.540.4458