



## Complaint Form

*To maintain the quality of IBHRE's certification program and to maintain fairness and impartiality, IBHRE's Executive Director reviews all complaints, reports to IBHRE's Board of Directors, and responds accordingly.*

### Part I

Submitted by (Name): \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

The complaint is about:

- The certification process including but not limited to the application and eligibility process
- Certification materials including but not limited to marketing, preparatory materials, or exam
- IBHRE management or personnel
- A grievance of misconduct
  - An IBHRE certified individual (Name: \_\_\_\_\_)
  - An IBHRE certification applicant (Name: \_\_\_\_\_)
- Other

### Part II

Summarize the complaint (use additional sheets if necessary – include date(s), persons involved, observed behavior, and/or communication, etc. as appropriate).

**Part III** (grievances regarding the IBHRE Code of Ethics)

If applicable, explain how you believe this incident is in violation of the IBHRE Code of Ethics.

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Complainant's relationship with person whom complaint is being filed:

supervisor       coworker       patient  
 program director/academic advisor       other (specify): \_\_\_\_\_

Other persons with knowledge of the incident(s):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

The information that I have provided is an accurate description of the event(s) that occurred.

Signature of person filing complaint: \_\_\_\_\_

Date: \_\_\_\_\_

Forward the completed Complaint Form to Tracy Lofty, IBHRE's Executive Director,  
at [tlofty@hrsonline.org](mailto:tlofty@hrsonline.org).