

**Complaint and Grievance Form**

*To maintain the quality of IBHRE’s certification program and to maintain fairness and impartiality, IBHRE’s CEO reviews all complaints, reports to IBHRE’s Board of Directors, and responds accordingly.***Part I**

Submitted by (Name):

Address:        
  
Telephone:

Email:

This 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 (Refer to Certification Grievance Policy)

An IBHRE certified individual (Name):

An IBHRE certified applicant (Name):

Other (specify):

**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**

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

Complaint’s relationship with person whom complaint is being filed:

supervisor  coworker  patient

program director/academic advisor

other (specify):

If complaint is against IBHRE staff or the certification process and materials, specify your position:

applicant/examinee  IBHRE certified

**I Accept (By selecting the “I Accept” button, you are signing this form electronically. You agree that your electronic signature is the legal equivalent of your manual signature.**

7.19.2024