



**COMPLAINT FORM FOR ALLEGED VIOLATIONS OF
THE RULES OF PROFESSIONAL CONDUCT AND
THE STANDARDS OF PRACTICE
FOR THE RIGHT OF WAY PROFESSION
(Ethical Rules)**

COMPLAINT FORM INSTRUCTIONS

I. FORM OF COMPLAINT:

- An Ethics Complaint must be written and submitted on this form.
- An Ethics Complaint may be anonymous.

II. CONTENTS OF COMPLAINT:

- Name of the Association Member or non-member designee being charged, along with their Region and Chapter if known.
- Facts regarding the complaint.
- Dates, if available.
- Identification of supporting documentation.
- Copies of any documents you refer to in your complaint.
- Sections of Rules or Standards that are alleged to have been violated.

III. SIGNATURE AND DELIVERY:

- Complaint *need not* be signed to be valid.
- Complaint must be delivered to the Chair of the International Ethics Committee.
- Existence of the complaint must not be communicated to any other person who is not involved in the investigation of the complaint.

CONFIDENTIALITY REQUIREMENT

All written complaints, conversations, documents, or other activities involving an alleged Ethics violation are confidential and shall not be revealed in any manner to anyone except those Association members charged with the responsibility of investigating said complaint and the individual being charged. Therefore, you, as the complainant, may not disclose the fact that you filed this complaint and may not discuss its contents with anyone other than those involved in the investigative process (if you choose to disclose your name). Only the respondent and those involved in the investigative process will be provided with the information contained in this complaint.

You understand that by submitting this form, you are giving the IRWA Ethics Committee permission to share the information contained in your complaint, and any additional information that you submit, for the purpose of investigation, inspection or any discipline proceedings, regarding the individual about whom you have a complaint or concern.

YOU MAY FILE YOUR COMPLAINT ANONYMOUSLY

You may choose to sign the complaint and provide your contact information, or you may choose to file your complaint anonymously. Here are some things you should consider:

If you disclose your name, your name will *not* be disclosed to the respondent unless you indicate otherwise on the form or if legal proceedings require disclosure. The Investigation Committee may also ask you for additional information to assist in the investigation. You will be notified of the results of the investigation.

If you file anonymously, then obviously your name will be unknown to both the respondent and those involved in the investigation. You will have no further input in the investigative process and will not be informed of the outcome.

Regardless of whether you file anonymously or not, your complaint **MUST** be complete and detailed. All complaint forms will be screened to ensure that there is sufficient information to justify appointing an Investigation Committee. If there is insufficient information in your complaint, no further action will be taken and your complaint will be dismissed.



COMPLAINT FORM

To: International Ethics Committee Chair
(See current address for presiding Chair on IRWA website)

I. INFORMATION ABOUT YOU (COMPLAINANT) (OPTIONAL)
Name:
Region/Chapter:
Address:
Phone No.
Email Address:
I authorize disclosure of my name to Respondent (Circle): YES NO
II. INFORMATION ABOUT THE PERSON WHOM YOU ALLEGE VIOLATED ETHICS RULES (RESPONDENT) (MANDATORY)
Name:
Region/Chapter if known:
Employer if known:
Address if known:
Phone No. and Email address, if known:

III. ABOUT YOUR COMPLAINT:

A. Please identify which section(s) of the Code of Ethics, Rules of Professional Conduct and/or Standards of Practice of the Right of Way Profession you believe have been violated (all documents are available on www.irwaonline.org):

B. Please explain the factual basis of your complaint, including but not limited to any discussions or conversations with the Respondent, efforts to resolve your concerns, and time-line of events. Specific particular instances including dates, places, documents, etc., are important.

Attach separate written page if necessary.

Dated this _____ day of _____, 20_____.

OPTIONAL:

SIGNATURE

Please print full name

Submit by E-mail