

Before completing this Complaint Form, please ensure that you have reviewed the Complaints & Discipline page and the relevant complaint and discipline provisions of the CSAP Bylaws and Rules, available on the CSAP Society website. The complaint must relate to a submission to the Ministry Director respecting work under Protocol 6, or to another matter specifically designated as "CSAP Work" under the CSAP Rules. A complaint must be filed within six (6) months of the complainant becoming aware of, or having ought to have known of, the grounds for the complaint. A separate complaint form must be completed and submitted for each CSAP Member named in the complaint.

Complainant Information

Name: _____

Company: _____ Address: _____

Telephone: _____ Email: _____

CSAP Member Information

Name: _____

Company: _____

Details

Location: _____

Date & Time: _____ Type of Work: _____

Nature of Complaint: _____

Description of Complaint: (Please provide factual information regarding the complaint, as per the criteria outlined in Section 3 of the Discipline Committee Guidelines, including what has taken place, and dates the action occurred. Also, provide copies of all relevant documents.)

Complainant Signature

Date

Acknowledgement of Complaint

Executive Director Signature

Date Received