



CANADIAN COLLEGE OF PROFESSIONAL COUNSELLING PRACTITIONERS

Ethics Complaint Form

Please type or print in ink. Please review the documents Instructions for filing a CCPCP Ethics Complaint to assist you in completing this form.

Have you verified that the person you want to file against is a CCPCP Member?

Yes _____ No _____

If no, please contact our office to make sure the individual is a member of the CCPCP. CCPCP cannot process complaints against non-members.

Person making complaint: _____

Address: _____

Phone: _____ Email: _____

Member you are filing a complaint against: _____

Phone: _____ Email: _____

Note: you must file a separate form for each individual you wish to file a complaint against.

When did the alleged unethical behavior begin? _____

What is the most recent date of the alleged unethical behaviour? _____

Have you discussed the situation with the counsellor you are complaining about?

_____ Yes _____ No

Have you filed a complaint with any other organization(s)?

_____ Yes _____ No

If yes, please indicate below:

_____ Yes, Name of the organization or professional association

Date: _____ Status: _____

_____ Yes, Civil Suit (e.g., malpractice suit)

Date: _____ Status: _____

_____ Yes, Other (e.g., university grievance)

Date: _____ Status: _____

Please answer the following questions to help us to understand your complaint:

Summarize for us in 2-3 sentences the nature of the alleged ethical misconduct:

List the Ethical Standard(s) you believe have been violated:

On separate paper, please type (or print neatly in ink) the following information while being concise as possible:

- (1) A summary of the events in chronological order leading up to the behaviour including the most important dates related to the behaviour by the counsellor,
- (2) A complete account of the behaviour at issue,
- (3) Any relevant information about what happened after the behaviour occurred, and
- (4) Any steps you have taken to address the situation.

Please send us photocopies (NOT originals) of any evidence you have related to your allegation.

Note: Please only send documents directly relevant to your complaint. A large volume of unnecessary documentation may delay the completion of review of your complaint.

If this is a billing matter, have you included all of the relevant bills?

_____ Yes _____ No _____ NA

If this is related to an evaluation, have you included (i) any court order appointing the evaluator, (ii) the evaluation itself, and (iii) transcript(s) of any testimony by the member related to the evaluation?

_____ Yes _____ No _____ NA

If this is related to therapy, have you included proof of the dates of treatment and correspondence with the member?

_____ Yes _____ No _____ NA

*****Important*****

Please sign each of the releases below without modification. We will only process your complaint form if these releases are complete. If they are incomplete, processing of your complaint will be delayed while we return this from to you for your signature.

Releases

I hereby give the member(s) against whom I am making this complaint permission to give the CCPCP Ethics Committee any confidential information regarding me, including any records of our interactions, and to answer all questions the Committee may have concerning such information.

Signature: _____

Date: _____

I hereby give the CCPCP Ethics Committee permission to send to the member(s) against whom I am making this complaint, copies of any materials submitted by me or on my behalf concerning this complaint.

Signature: _____

Date: _____

I hereby waive any right to subpoena from CCPCP or its agents, for the purposes of private civil litigation, any documents or information concerning this matter.

Signature: _____

Date: _____

Return the completed form and documentation to:

Canadian College of Professional Counselling Practitioners
P.O. Box 23045
Vernon, BC
V1T 9L8