

A HIGHER LEVEL of management consulting

Institute of Certified Management Consultants of Ontario

Member Ethics Complaint Form



Institute of Certified Management Consultants of Ontario Confidential Member Professional Conduct Complaint Form Procedures

Guidelines to complete this form

This form is supplied by the Institute of Certified Management Consultants of Ontario (ICMCO, or CMC-Ontario) to individuals, groups or organizations who want to submit a complaint regarding the professional conduct of an ICMCO member.

To start the complaints process, each Complainant must complete this form and submit it to:

CMC-Ontario Registrar 2 St. Clair Avenue West, 18th Floor Toronto, ON. M4V 1L5

Pursuant to ICMCO's Complaints Procedures, the Complainant(s) and anyone against whom charges are filed must treat this form and all information submitted to the Registrar, Investigator and Discipline Committee as confidential.

This form may be completed on www.cmc-canada.ca and submitted through the website, but no action will be taken until an original signed copy is received by mail or courier at the address above. All additional relevant information in support of the complaint must also be sent by mail or courier; fax or email is not accepted. A complaint is forwarded to the Discipline Committee when:

- 1. the completed Complaint Form is received by mail or courier;
- 2. all information in support of the complaint is received by mail or courier; and
- 3. any additional information/documentation requested by the Registrar, Investigator or Discipline Committee is received.

Confirmation of receipt of the complaint will be sent by CMC-Canada staff to the Complainant. Incomplete complaints will not be reviewed by the Registrar. Anonymous or frivolous complaints are not permitted and will not be reviewed.

Complainants should review CMC-Canada's Uniform Code of Professional Conduct both before and during the preparation of a complaint in order to understand the organization's standards.

This Complaints Process should not be used to report problems or concerns with ICMCO volunteers or CMC-Canada staff. Those concerns, plus questions about organizational or policy matters should be directed to the Chief Executive Officer.

Complainants are responsible for all costs associated with filing a complaint and all personal costs related to their involvement in the Professional Conduct Complaint process.



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| Person Registering Complaint (the Complainant) | | | |
|--|-------------|----------------|--------------|
| Preferred Salutation: Mr. Miss Ms. Mrs. Dr. Other | | | |
| Surname: | Given Name: | | |
| Company: | Title: | | |
| Company Address: | | | |
| City: | | Province: | Postal Code: |
| Business Telephone: ext | | Email address: | |

| Management Consultant you are complaining about | | | |
|---|-------------|----------------|--------------|
| Mr. 🗌 Miss 🗌 Ms. 🗌 Mrs. 🗍 Dr. 🗋 Other | | | |
| Surname: | Given Name: | | |
| Company: | Title: | | |
| Company Address: | | | |
| City: | | Province: | Postal Code: |
| Business Telephone: ext | | Email address: | |
| CMC FCMC Don't know | | | |

| What is your relationship to the consultant? | |
|--|--|
| Client Employer Colleague another CMC | |
| | |
| | |
| Other: | |
| | |
| | |
| | |

| Details of Complaint | |
|---|--|
| Dates of Engagement | |
| Location of Engagement | |
| Your understanding of the Engagement | |
| Your understanding of the | |
| Engagement fee | |
| Specific concerns about the Engagement | |
| Names of any lawyers, accountants or other professional bodies you have spoken to about this Engagement. | |
| Note that one or more of these people may be contacted about this Complaint. | |

| Details of any discussion you have had with the consultant | |
|---|--|
| concerning the Engagement. | |
| List the steps you have taken to resolve the issue with the Consultant prior to submitting this form. | |
| | |
| State the applicable provisions of CMC-Canada's Uniform Code of Professional Conduct that you feel have been violated. | |
| How has this affected your business? What loss or harm has been experienced that is attributable to this complaint? | |
| What would you consider to be an appropriate resolution to your complaint? | |
| Is there anyone else – either at your place of business or elsewhere – that you would like us to talk to? | |
| Include name, contact information, title and role in the Engagement, if any. | |

| List all documents pertaining to the complaint that are attached to this form. | |
|--|--|
| Note that originals of this Complaint Form and all supporting documents must be mailed/couriered to the address above. | |
| Additional information | |
| | |
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| | |

Statement and certification

By submitting this professional conduct complaint, I charge the Consultant identified herein with a violation (s) of the CMC-Canada Uniform Code of Professional Conduct. I have read the Procedures that form part of this document and I agree to abide by the conditions and terms of these rules.

I understand that I am required to, and ICMCO shall make reasonable efforts to, keep the information that has been, and will be, submitted concerning this proceeding confidential as set forth in the Procedures and subject to its exceptions.

I also understand that the Consultant may receive a complete, non-redacted copy of this document, as well as other information that is submitted with regard to the Professional Conduct Complaint.

I further understand that some or all of the information submitted with regard to the Complaint may be disclosed – in either redacted or non-redacted form – to ICMCO members and others following a final determination by the Registrar and/or Discipline Committee.

I certify that the factual allegations made in this ICMCO Ethics Complaint are true and accurate to the best of my knowledge and that these charges are made in good faith.

Signature of Complainant _____

| Printed Name | |
|--------------|--|
| | |

Date _____