

**NORTH DAKOTA STATE BOARD OF BARBER EXAMINERS**

**COMPLAINT FORM**

**INSTRUCTIONS:** Please type or print clearly in pen or ink. Complete all applicable areas of this form accurately to the best of your knowledge and information. Provide all information that you know or can discover with reasonable investigation.

**1. PERSON, BARBER, BARBER SHOP OR BARBER COLLEGE AGAINST WHOM THE COMPLAINT IS MADE:**

Name \_\_\_\_\_

Address, City, Zip \_\_\_\_\_

\_\_\_\_\_

Telephone # \_\_\_\_\_ (home) Telephone # \_\_\_\_\_ (work)

Is the person licensed? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ unknown

**2. PERSON MAKING THE COMPLAINT:**

Name: \_\_\_\_\_

Address, City, Zip \_\_\_\_\_

\_\_\_\_\_

Telephone # \_\_\_\_\_ (home) Telephone # \_\_\_\_\_ (work)

Are you a licensed Barber? \_\_\_\_\_ yes \_\_\_\_\_ no

Are you a student enrolled in Barber College? \_\_\_\_\_ yes \_\_\_\_\_ no

**3. NATURE OF COMPLAINT:** Detail in concise terms the facts giving rise to your complaint. It is important that you explain what occurred as completely as possible so that the board can have a full understanding of the nature of the complaint. Be specific as to date, time, place, people, addresses, and telephone numbers. If additional space is required use a separate sheet of paper. Attach any documents and paper which relate to the acts or occurrences complained.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. List persons who were witness to the complaint(s) or who otherwise are likely to have first-hand knowledge about the complaint(s).

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City, Zip \_\_\_\_\_ City, Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Telephone # \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City, Zip \_\_\_\_\_ City, Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Telephone# \_\_\_\_\_

5. Are you willing to appear under oath as a witness and be cross-examined concerning the allegations made in the complaint? \_\_\_\_\_ Yes \_\_\_\_\_ No (If you are unwilling to testify or fail to appear if requested, the North Dakota State Board of Barber Examiners may dismiss the complaint.)

**I declare and affirm under penalties of perjury that this information has been examined by me, and to the best of my knowledge and belief, is in all things true and correct:**

Complainant Signed \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

My commission expires: \_\_\_\_\_

(SEAL)

Notary public - North Dakota

**NORTH DAKOTA STATE BOARD OF BARBER EXAMINERS ACTION ON COMPLAINT**

When the complaint has been received, the board will conduct an investigation. The board will review the complaint and determine appropriate action. You will be notified of any action or proposed action by the board.