**PROFESSIONAL CONDUCT**



**ALLEGATION FORM**

**PLEASE ENSURE YOU HAVE READ THE REGULATIONS FOR PROFESSIONAL CONDUCT BEFORE COMPLETING THIS FORM**

1. **COMPLAINANT**

Name:

Address:

Telephone number:

Date allegation submitted:

1. **RESPONDENT** (the person you are making the allegation against)

Name:

Address(es):

**3. ALLEGATION**

 Which clause(s) of which regulation(s) do you believe to have been contravened?

**4.** **FURTHER INFORMATION**

 How have they been contravened? **Please attach a statement.** (Give details of incidents or behaviour, and supply all relevant names, dates or other information which may help the Institute investigate. Please cross-refer to any supporting documents you are submitting.)

 How many sheets of your statement are enclosed?………………………………..

 How many sheets of supporting documents are enclosed……………..…………...

1. **Please describe your attempts to resolve any disputes before submitting the allegation**

**6. STATEMENT**

I understand and agree that:

* + - Any part of my submission may be copied to the Respondent.
		- Allegations of professional conduct are made at my risk. All evidence presented during professional conduct proceedings is at the risk of the person presenting it. The Institute, its Board of Directors and any members of the Institute solely by reason of the fact that they are a member of a panel shall be under no liability in respect of any loss or liability in respect of any act, omission or statement by any person in connection with professional conduct procedures.
		- The Institute may at any time adjourn or suspend its proceedings.
		- The Institute will not commence its proceedings until the end of any civil or criminal proceedings related to an allegation of improper conduct.
		- The Institute will not seek to recover the costs of a professional conduct inquiry; nor will it pay costs, fees or expenses incurred by the respondent, complainant or their advisers.
		- I will keep information about the fact of, progress and outcome of an assessment, investigation, or appeal confidential until advised otherwise by the Institute. If I fail to comply with this, I understand that the Institute may at its absolute discretion dismiss a complaint and/or issue a public or private reprimand.
		- The Institute will seek to ensure that all inquiries are treated in confidence, but the Institute does not accept any liability arising from failure by the person to observe confidentiality.
		- My contact information and documentation relating to this allegation will be stored and used by the Institute in accordance with its Data Protection Policy (www.archaeologists.net/codes/cifa)

Signed……………………………………………….. Date…………………………….