



North Carolina Behavior Analyst Licensure Board

701 Exposition Place, Suite 206 • Raleigh, NC 27615

Phone 919-443-0093

www.ncbehavioranalystboard.org • admin@ncbehavioranalystboard.org

Ethics Complaint Form

21 NCAC 05 .0601 COMPLAINT PROCEDURES

Any individual with personal knowledge that any person has violated the Code of Conduct, any other rules of this Chapter, or G.S. 90, Article 43, may file a complaint by submitting this form.

The complaint shall be in typed or handwritten format stating the nature of the alleged offense and signed by the complainant.

Complainant (Person filing complaint)		
Complainant First Name	Complainant Last Name	
Complainant Mailing Address		
City	State	Zip
Daytime phone number	Cell phone number (if different from daytime phone number)	
Email address		
Respondent (Person complaint is about)		
Respondent First Name	Respondent Last Name	
Respondent Mailing Address		
City	State	Zip
Phone Number	Email address	
The respondent is a/an: ____ Behavior Analyst ____ Assistant Behavior Analyst ____ Registered Behavior Technician (RBT)/Behavior Technician (BT)* <small>*If respondent is an RBT/BT please include their supervisors contact information below.</small>		
RBT/BT Supervisor Contact Information		
Supervisor's First Name	Supervisor's Last Name	
Supervisor's Mailing Address		
City	State	Zip
Phone number	Email address	

Statement of facts. This statement should describe the allegations in as much detail as possible.
If additional space is needed, please include on additional pages.

Please sign below to indicate that the information you have provided is true and accurate to the best of your knowledge.

Signature

Date

Submit this completed form and any additional supporting information to the Board office via US mail or email.

Mailing Address: NC Behavior Analyst Licensure Board
701 Exposition Place, Ste 206
Raleigh, NC 27615

Email: admin@ncbehavioranalystboard.org