

# ETHICS CHARGE STATEMENT

**NOTE:** This form is supplied by the National Board for Certification of Orthopaedic Technologists, Inc. (NBCOT) to individuals, groups or organizations (Complainants) who want to submit ethical conduct allegations concerning an NBCOT certificant, or candidate for certification. In order to start the ethics complaint process, each Complainant must complete this form, or prepare a similar detailed description of the factual allegations supporting the charges, and send this information to:

**National Board for Certification of Orthopaedic Technologists, Inc. (NBCOT)  
4736 Onondaga Blvd. #166  
Syracuse, NY 13219-3304**

NBCOT strongly recommends that all Complainants review the NBCOT Code of Ethics, as well as the NBCOT Ethics Case Procedures, before and during the preparation of an Ethics Charge Statement in order to understand the organization's procedures and ethical standards. You will find these policies on the NBCOT Internet site, located at <http://www.nbcot.net/>. Complainants may also telephone the Executive Director at (855) 476-7767 between 9:15 AM - 5:00 PM Eastern Standard time, weekdays, with any questions concerning the process.

**(Please Print In Ink or Type the Following Information)**

Complainant's Name (your name): \_\_\_\_\_

Complainant's Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Complainant's Phone #: (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_

Certificant/Candidate's (Respondent) Name: \_\_\_\_\_

Certification No. (if known, and if applicable): \_\_\_\_\_

Certificant/Candidate's Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Certificant/Candidate's Phone No.: \_\_\_\_\_



4. List of Witnesses and Documents to be Submitted and Considered:

**STATEMENT AND CERTIFICATION OF CHARGES**

By submitting this Ethics Charge Statement, I charge the certificant/candidate identified with a violation(s) of the NBCOT Code of Ethics. I have read the NBCOT Ethics Case Procedures, and I agree to abide by the conditions and terms of these rules. I understand that the information submitted to NBCOT concerning this ethics proceeding will be kept confidential, as set forth in the Ethics Case Procedures. I also understand that the accused certificant/candidate (Respondent) will receive a copy of this document, as well as other information that is submitted with regard to the ethics case.

I further certify that the factual allegations made in this NBCOT Ethics Charge Statement are true and accurate to the best of my knowledge and that these ethics charges are made in good faith.

Signature of Complainant: \_\_\_\_\_

Date: \_\_\_\_\_