

# **IFSAC Complaint/Dispute Procedure**

(April 2019)

## **PURPOSE**

The purpose of the complaint/dispute procedure is to resolve complaints/disputes, other than Code of Conduct complaints, lodged against IFSAC members, entities, or Administration. Code of Conduct complaints shall follow the procedures outlined in the Code of Conduct. This policy applies to anyone filing a complaint/dispute.

## **APPLICATION**

All complaints/disputes must initially be filed using the IFSAC Complaint/Dispute Form. All attempts at bringing about a satisfactory resolution for all parties will be made.

## **PROCEDURE**

1. Upon receiving a Complaint/Dispute Form, IFSAC Administration will acknowledge, in writing, receipt of the form.
2. The levels of review for all complaints received at IFSAC Administration are as follows:
  - a. IFSAC Manager
  - b. Chair of the appropriate Board of Governors
  - c. Board of Governors
  - d. Appropriate Assembly
3. IFSAC policy is that all complaints should be handled at the lowest possible level.
4. If the complaint/dispute is against a particular level, or if the complaint/dispute is beyond the scope of that level of review, the complaint/dispute will be referred to the next level of review.
5. The individuals or entities named in the complaint/dispute will be advised of the details of the complaint/dispute.
6. If further information is required, the complainant will be contacted and requested to provide the necessary documentation or information within 15 days.
7. If the complainant fails to respond within 15 days, the following apply:
  - a. In no case will unsubstantiated complaints be sufficient to justify revocation of accreditation.
  - b. In the absence of evidence to the contrary, members targeted by complaints are presumed innocent.
  - c. Further, in the absence of evidence, members are NOT required to present an “active” defense.

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8. The member will be provided the basis of the complaint/dispute and will be given 15 days to respond.
9. If a member fails to respond within the 15-day time limit, IFSAC will assume that the complaint/dispute has merit.
10. Upon receipt of the member's response, all information will be reviewed at the appropriate level seeking to assist both parties in finding a satisfactory resolution.
11. If no satisfactory resolution is agreed upon, then the complaint shall be referred to the next level. If the complaint/dispute reaches the highest level, the respective assembly, then the decision of the assembly shall be final.
12. All complaints will be kept on file for a period of one (1) year.

*IFSAC Complaint Dispute Form begins on next page.*

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**IFSAC Complaint/Dispute Form**

If you have a complaint/dispute, other than a Code of Conduct complaint, involving an IFSAC member, entity, or Administration, this is the appropriate form to file. Code of Conduct complaints shall follow the procedures outlined in the Code of Conduct. We will record and look into the complaint/dispute and try to resolve it. We cannot accept complaints regarding non-members. Use of this form is the ONLY means of submitting complaints.

Please understand that honesty and fairness are very important to IFSAC and we pledge to be as impartial as possible. We are not lawyers or a court of law, just people. We will treat you and your concerns with respect and courtesy. We expect to receive the same courtesy and respect that we give you and others. In order to prevent the filing of false or frivolous complaints by individuals seeking to hurt or degrade the individuals or entities named in the complaint, all data must be provided or the complaint/dispute will not be processed. IFSAC DOES NOT ACCEPT ANONYMOUS COMPLAINTS.

**Section I:** All information is subject to complete verification, and will be kept confidential from everyone except those with whom you have the problem and those at the respective levels of review. Please do not ask us to conceal your identity or the information you provide on this form from other individuals/entities involved. All sections must be accurately completed.

Your Full Name	
Your Address	
City/State/Zip Code	
Country	
Telephone Number	
Fax Number	

**Section II:** This section requires that you provide identifying details for the member with whom you have complaint.

Entity Name	
Entity's Address	
City/State/Zip Code	
Country	
Telephone Number	

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**Section III:** This section requires that you provide identifying details of the entity representative(s) with whom you spoke concerning the dispute or complaint.

Name	Title

**Section IV:** This section requires that you provide detailed information about the dispute or complaint. Please use a separate sheet of paper if necessary to answer the following:

A. Describe the complaint/dispute in sufficient detail, including information such as dates, conversations, letters, emails, and any other relevant details. Please mention any attempts made by the member entity/individual to work with you to resolve the problem. Include any applicable documentation to support your claim.

B. Is there anything the member entity/individual could do NOW that would satisfy you and resolve the problem? Please describe:

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Send completed Complaint/Dispute Form, supporting documentation, and/or responses to:

ATTN: Manager  
IFSAC  
Oklahoma State University  
1723 W Tyler Ave  
Stillwater, OK 74078-8075

Email: [esadler@ifsac.org](mailto:esadler@ifsac.org)