

INTERNATIONAL ACADEMY OF NDT

INITIATING A FORMAL COMPLAINT AGAINST A CERTIFICATE HOLDER.

Name of Complainant:	Complainant's Company/Employer:	
Complainant's position in Company:	Nature of Company/Employer	business:
Complainant's address:	,	
Complainant's telephone number:	Complainant's email address:	
Date of complaint:	Isolated / Repetitive Incident:	
Name of individual subject to complaint:	Unique Certification Number o	f Individual:
Is the nature of complaint 'Technical' or 'Code of Conduct':		
Summary of complaint:		
Signature of Complainant:		Date:

All complaints or appeals must be made in writing. Please send or email to admin@iandtcb.org