



NATIONAL ASSOCIATION OF PARLIAMENTARIANS®

MEMBER DISCIPLINE COMPLAINT FORM

Adopted by the Professional Standards Committee September 22, 2020

Please provide your name and contact information (must be a member of NAP):

Name of Complainant	
Address	
City	
State/Province/Country	
ZIP/Postal Code	
Phone	
E-mail Address	
Date of Complaint	
Date(s) of Alleged Violation(s)*	
Signature of Complainant	

**Earliest alleged violation must have occurred no more than one year prior to filing of complaint.*

Please provide the name and contact information of NAP member against whom this complaint is being filed:

Name of Respondent	
Address	
City	
State/Province/Country	
ZIP/Postal Code	
Phone	
E-mail Address	

Check which of these violations you are alleging:

Conduct injurious to NAP or its object.

Conduct bringing disrespect on NAP.

Willful violation of NAP Bylaws or Standing Rules. If this is checked, specify the exact provisions alleged to be violated. *(Attach additional pages if needed.)*

Describe the alleged violation(s) using the criteria listed above. Be specific and provide as many details as possible. Explain why the alleged conduct should be regarded as a violation of the relevant standard(s). Attach or provide links to any relevant documents (see Rule I.F of the *Rules for Processing of Member Discipline Complaints.*) *(Attach additional pages if needed.)*