

TURKS AND CAICOS ISLANDS



## **Complaint Submission Form**

### **Self-Submission Version**

#### **Instructions:**

- I.) Please complete this form by typing or written in blue or black ink**
- II.) Please write clearly and remember to read and sign the last page**
- III.) Please note while it is not mandatory that every area in this form be completed the more information you provide to us in your submission, the more equipped we will be to address your complaint in the shortest possible time frame. While you do have the option to make this complaint anonymously doing so may make it difficult for us to investigate your matter and update you on the outcome. We therefore recommend that you at least provide us with some way of contacting you.**
- IV.) If you require any assistance with completing this form please contact our office to make arrangements. All contact details are listed at the end of this form.**

# SECTION I

## Contact Information of Person Submitting Complaint:

Title	First Name	Middle Name	Last Name

### Address:


Island/State	Country	Postal Code:

### Telephone Contacts:

Home	( ___ ) ___ - ____	
Work	( ___ ) ___ - ____	Ext ( _____ )
Mobile	( ___ ) ___ - ____	

### E-mail Address:

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## SECTION II

Is this complaint being made on behalf of another party?

YES or  NO

Note: If your answer is NO please proceed directly to section III.

Is the person aware that you are making a complaint on their behalf?

YES or  NO

Please provide the reason for submitting this complaint on behalf of the person:

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Please provide the contact details for the person on whose behalf you are submitting this complaint:

Title	First Name	Middle Name	Last Name

Address:


Island/State

Country

Postal Code:

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Telephone Contacts:

Home	( ___ ) ___ - ____	
Work	( ___ ) ___ - ____	Ext ( _____ )
Mobile	( ___ ) ___ - ____	

E-mail Address:

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**Your Description of What Happened:**

A large rectangular area with a solid black border, containing 25 horizontal dotted lines for writing.



Please indicate the total number of supporting documents attached to this complaint submission.

No. of Attachments:

Description of Attachments:

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Names of Witnesses

1.)	6.)
2.)	7.)
3.)	8.)
4.)	9.)
5.)	10.)



## SECTION IV

Have you previously made a complaint on this matter to the Integrity Commission?

YES      or       NO

Have you previously reported this matter to another agency?

YES      or       NO

If yes, please indicate the agency and general date the report was made:

Agency Name	Date Report Submitted (DD/MM/YY)
	/      /

**Outcome of previous report:**

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**Desired Outcome of Complaint:**

(Please explain your desired outcome of submitting this complaint)

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Do you wish for your identity to remain anonymous if this matter needs to be referred to another public authority?

YES      or       NO



## Section V

### Notice to Complainant

#### Whistleblower Protection

The ‘Whistleblower Protection’ provisions outlined in the Integrity Commission Ordinance provides for protected disclosures. These provisions were designed to engender a culture of reporting genuine cases of wrongdoing in the public sector and to ensure that persons who make such complaints/reports to the Commission or to other relevant authorities do not suffer any detriment or are otherwise penalized for doing so. A Public Official who makes a complaint/ report about another public official is protected under these provisions. These provisions are outlined in Section 58D of the Integrity Commission Ordinance (*link*).

#### Complaints in Good Faith:

All complaints received by the Commission are accepted on the basis that they were submitted in good faith. Any person who maliciously makes a false allegation or maliciously provides false information against a public official commits a criminal offense under the Integrity Commission Ordinance. This offense is punishable by either fine or imprisonment or both.

#### Form Submission Methods:

This form can be submitted to the Integrity Commission using any of the following methods:

- I. By Email: [investigations@integritycommission.tc](mailto:investigations@integritycommission.tc)
- II. By registered post:  
**Attention: Chairman,  
Turks and Caicos Islands Integrity Commission,  
Franklyn Missick’s Building,  
Church Folly,  
Grand Turk,  
Turks and Caicos Islands,  
TKCA 1ZZ**
- III. In Person
- IV. By FAX: (649) 946-1355

*For highly confidential information we recommend that the form be submitted either in person, by registered post or by FAX.*

#### Please Sign and Date:

Your signature confirms that you hereby submit this complaint having read and understood the above notice.

Signature: \_\_\_\_\_

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