



ARKANSAS PEER SPECIALIST PROGRAM



INSTRUCTIONS FOR FILING AN ARKANSAS PEER ETHICS COMPLAINT

The “Complainant” is the person filing this form against a person you believe has breached the code of ethics. The “Respondent” is the person you are filing an ethics complaint against.

1. On front page, fill out the “*Complainant*” section with your information.
2. On front page, fill out the “*Respondent*” section with the information of the person you are filing a complaint against.
3. On front page, fill out the “*Witness*” sections with the information of any and all persons who are aware of the behavior about which you are filing a complaint (*attach additional sheets if necessary*).
4. Read the Arkansas Peer Specialist Ethics Enforcement Procedure, available at <https://www.naadac.org/arkansas-peer-specialist-codes-of-ethics>.
5. Please type or print legibly.
6. Please sign and date the bottom of the front page.
7. On page 2, please list each Ethical Principle and Section that you allege has been violated and, in as few words as possible, describe the behavior you believe has violated that Section. Please list one in each space (*attach additional sheets as necessary*).
8. When you are finished listing and describing each alleged ethics violation, attach any and all evidence you have to present to confirm your allegations (*witness testimony must be notarized*).
9. Once you have attached all your evidence, place it in a large envelope with the *Arkansas Peer Ethics Complaint Form*, mark it “Confidential,” and address it to:

Arkansas Peer Ethics Review Committee
P.O. Box 3708
Little Rock, AR 72203

10. Wait for additional notification and/or instruction from the Arkansas Peer Ethics Review Committee.



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ARKANSAS PEER ETHICS COMPLAINT FORM

This form is to be used only to submit a complaint with the Arkansas Peer Ethics Review Committee against a Peer Specialist or Peer Supervisor for violating the Arkansas Peer Recovery and/or Arkansas Peer Supervisor Code of Ethics. Please type or print neatly and COMPLETE BOTH PAGES of this form.

I, the undersigned (hereinafter, the *Complainant*), wish to file a complaint with the Arkansas Peer Ethics Review Committee for conduct by a Peer Specialist or Peer Supervisor (hereinafter, the *Respondent*), which I believe violates the Arkansas Peer Recovery and/or Arkansas Peer Supervisor Code of Ethics.

Complainant's Full Name: _____

Full Address: _____

Phone: (W) _____ (H) _____ (C) _____

Email: _____

Respondent's Full Name: _____

Full Address: _____

Phone: (W) _____ (H) _____ (C) _____

Email: _____

Other persons who have knowledge of the subject matter of this complaint who could offer evidence in support of the allegations contained herein (attach additional pages with the same information if necessary).

Witness #1's Full Name: _____

Full Address: _____

Phone: (W) _____ (H) _____ (C) _____

Email: _____

Witness #2's Full Name: _____

Full Address: _____

Phone: (W) _____ (H) _____ (C) _____

Email: _____



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By affixing my signature hereto, I consent to release all information necessary to investigate this complaint. I also acknowledge that I have read and agree to abide by the Instructions for Filing an Arkansas Peer Ethics Complaints and the Arkansas Peer Specialist Ethics Enforcement Procedure. The Complaint **will not** be processed without your signature.

Your Signature: _____ Date: _____

Please note: If the respondent is certified through the Arkansas Peer Specialist Program and/or a member of NAADAC, this complaint will be forwarded to the appropriate Ethics Review Committee(s), and appropriate procedures will be followed.

Please list the Ethical Principles, Standards, Sections, and Subsections that were violated and how they were violated.

Principle ____, Section ____ . Describe the behavior that violates this section:

Principle ____, Section ____ . Describe the behavior that violates this section:

Principle ____, Section ____ . Describe the behavior that violates this section:

Add additional sheets as necessary and attach all pertinent documentation to support the allegation(s).

Send completed form to:

Arkansas Peer Ethics Review Committee
P.O. Box 3708
Little Rock, AR 72203