**FM 026 RECORD OF AN APPEAL AND/OR COMPLAINT**

1. To be filled out by the IAAC Secretary:

**Information of the claimant and/or appellant:**

|  |  |  |
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| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephones: +(\_\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | Type: Complaint ( \_ ) Appeal ( \_ ) Receipt date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Complaint No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|

**The issue is related to:**

|  |
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| Issue:( \_ ) IAAC activities( \_ ) IAAC member accreditation body( \_ ) MLA Group decision( \_ ) MLA management process and MLA peer evaluators( \_ ) IAAC decision |

|  |  |
| --- | --- |
| DATE | IAAC SECRETARY RESPONSE TO THE ISSUE |
| xx/xx/xx | ACCEPTEDNOT ACCEPTED (REASONS OR REQUEST APPLICANT TO ADDRESS ISSUE PREVIOUSLY OR TO RESOLVE IT)  |
| DATE | APPLICANT’S RESPONSE  |
| 20xx/xx/xx |  |
| DATE | SECOND IAAC RESPONSE (IF APPLICABLE)  |
| 20xx/xx/xx | ACCEPTEDNOT ACCEPTED |

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| --- |
| Appointment of Working Group by the IAAC Chair:Date: 20xx/xx/xx |
| Members of the Working Group to address the complaint (CWG) (delete as appropriate):    | Accepted by:Name/position: Date: 20xx/xx/xx |
| Members of the Working Group to address the appeal (AWG) Or appointed team leader (delete as appropriate):   | Accepted by:Name/position: Date: 20xx/xx/xx |

2) To be filled out by the leader of the CWG/AWG:

**INVESTIGATION REPORT OF THE APPEAL /COMPLAINT**

A) SUMMARY OF THE APPEAL/COMPLAINT

B) MANAGEMENT OF THE APPEAL/COMPLAINT

- Attach the report that describes the steps taken by the Working Group which contains the items established in the PR 005 procedure (Items 4 to 7, as appropriate).

- List the evidence submitted to IAAC- Previous and additional information including, if applicable, information related to the AB’s response, resolution or negotiation. Attach those considered necessary to make a decision.

- Information obtained from witnesses or experts contacted during the course of the investigation, as appropriate.

C) CONCLUSIONS AND RECOMMENDATIONS

DATE OF SUBMITTAL: 20xx/xx/xx

3) To be filled out by the IAAC Secretary:

FINAL DECISION

(Decision text indicating who made it and the supporting resolution, as appropriate)

DATE: 20xx/xx/xx

4) To be filled out by the leader of the CWG/AWG:

PUBLIC SUMMARY OF THE APPEAL/COMPLAINT

This summary should be a general description of the appeal/complaint without details of the organizations or persons involved. This summary must not contain any information that is considered confidential.

DATE: 20xx/xx/xx