

# NSA Austin Ethics Complaint Form



TO: President  
National Speakers Association – Austin Chapter  
9901 Brodie Lane Suite 160 PMB1428 Austin, TX 78748

FROM: Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

I am a current NSA Austin member  I am not a current NSA Austin member

1. NSA Austin member in question (Respondent):

\_\_\_\_\_

2. Describe in your own words what you consider the ethical violation to be, including all facts upon which you base your allegation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Article of Ethics Code violated: # \_\_\_\_\_

4. Date(s) of incident(s):  
\_\_\_\_\_

5. Location/occasion of incident:  
\_\_\_\_\_

6. Were other NSA Austin members directly involved? If yes, who were they and describe their involvement:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. How did you observe/discover the violation?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. When did you observe/discover or find out about it?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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9. What practices or actions by Respondent do you think the Ethics Committee should investigate?

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10. Who else knows or has possible information about the situation? Please give names and telephone numbers if known. Also state if these individuals are NSA members.

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11. Have you had any communication with anybody regarding this incident? \_\_\_\_\_ If so, please explain and attach copies of any written communication.

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12. What action, if any, have you taken to rectify the situation? List steps taken as well as the dates:

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13. Have you communicated with Respondent about your concern?   
If so, when and what response did you receive?

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14. Is this matter currently under legal action, or is it legally actionable?

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It is the duty and obligation of all NSA Austin members to come forward with evidence of perceived violations of the code of professional ethics (<https://nsa-austin.com/code-of-ethics>).

However, each NSA Austin member should be mindful of his or her professional obligations regarding confidentiality and the possible sanctions for abuse of the complaint procedures. Your signature signifies that the complaint is brought in good faith and not to harass the respondent.

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

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