ORGANIZATIONAL POLICY
May 18, 2005

FORMAL ETHICS
COMPLAINT FORM

This form is to be used when filing a formal ethics complaint concerning the actions of a member of the Handcrafted Soap & Cosmetic Guild. The exact procedures for the receipt, investigation and resolution of a complaint against a member are covered in HSCG Policy of April 28, 2005 (Revised) “Procedures for Reporting and Handling Ethics Complaints.”

The form must be completed in full, including initials where indicated and original signature at the end. The completed form, along with any documentation (send copies only) should be sealed in an envelope marked “Confidential - Ethics Committee,” placed in a mailing envelope and sent to:

Handcrafted Soap & Cosmetic Guild
attn: Ethics Committee
178 Elm St.
Saratoga Springs, NY  12866

1. Your Information:
   Name: _______________________________________________
   Company: _______________________________________________
   Address: _______________________________________________
   Phone: _____________________      Fax:  ____________________
   Email: _______________________________________________

2. Who is the complaint on?
   Name: _______________________________________________
   Company: _______________________________________________
   Address: _______________________________________________
   Phone: _____________________      Fax:  ____________________
   Email: _______________________________________________

3. What point(s) of the HSCG Ethics Code did this member violate?
4. Briefly state the substance of the complaint.
   (i.e. “unpaid bill” or “failed to deliver product I paid for” or “didn’t give refund as promised”)

5. Attach a full explanation of the complaint.
   Include all details, express your opinions and give all the information about it. Attach readable copies of all supporting documents you may have (do not send your originals) and statements from any witnesses.

6. What would resolve the matter for you?
   - ☐ Apology
   - ☐ Refund of $__________
   - ☐ Cease & Desist
   - ☐ Payment of $__________
   - ☐ Delivery of _____________________________________
   - ☐ Other: ________________________________________

7. Agreement with the Complaint Process:

   Please read each line below and initial to signify your understanding and agreement:
   - ☐ I have read and understand the Handcrafted Soap & Cosmetics Guild Code of Ethics as published in HSCG Policy April 28, 2005, Code of Ethics. ____________
   - ☐ I understand that any complaint filed against an HSCG Member must be based on an allegation of violation of one or more points of the Code of Ethics. ____________
   - ☐ I have read and understand the HSCG Ethics Procedures as published in HSCG Policy of April 28, 2005, Procedure for Reporting and Handling Ethics Complaints. ____________
   - ☐ I agree that during the course of this investigation and resolution by the HSCG Ethics Committee I will refrain from discussing this investigation, particularly in any public forum or venue, on-line or off-line. ____________
   - ☐ I agree not to take any additional steps to resolve this matter (such as reports to other agencies or pursuit of legal action) for 60 days after filing this complaint and, if at all possible, to hold off on any other actions until the matter is completely resolved by the HSCG Ethics Committee. I further agree to immediately inform the Ethics Committee Chairman should I take any other remedial action(s). ____________
   - ☐ I agree to immediately inform the HSCG Ethics Committee of any substantial change in the facts, status or resolution of this complaint. ____________

8. Submission:

   I have tried to resolve this matter myself to no avail. Therefore, I hereby submit this formal complaint on the above named HSCG member to the Handcrafted Soap & Cosmetic Guild Ethics Committee for investigation and resolution in accordance with the policies and procedures of the HSCG, Inc.

   I certify that the information I have submitted herein is true and accurate to the best of my ability.

   Signature: ________________________________________ Date: ___________________