

COMPLAINT REPORTING FORM

- All complaints must be in writing and signed
- A separate complaint reporting form must be submitted for each Registered Dental Technologist/Technician (Regulated member) being complained about.
- Please be advised that any and all information provided to the College of Dental Technologists of Alberta (CDTA) may form part of the investigation and is subject to release as authorized by the Health Professions Act (HPA), R.S.A. 2000, Ch 7.

1) Contact information of the person making the Complaint:

Full name: _____
Address: _____
City: _____
Telephone: _____
E-mail address: _____

2) Complainant information (if different than the one filing the complaint : I.E. Business, College etc.):

Full Name: _____
Address: _____
City: _____
Telephone: _____
Relationship to Complainant: _____

3) Name of Regulated member being complained about _____

4) Complete names of other individuals or institutions from which information or records may be obtained:

