

## Complaint Form

### Your Contact Details

<b>Name</b>	<input type="text"/>
<b>Address</b>	<input type="text"/>
<b>Post Code</b>	<input type="text"/>
<b>Telephone</b>	<input type="text"/>
<b>Email</b>	<input type="text"/>

### About the complaints process

**Is the individual a member of the CISI?**  
 No  Yes

**Has the individual breached one or more Principles of the CISI's Code of Conduct?**  
 No  Yes

**Have you contacted the individual's employer?**  
 No  Yes  If Yes, what was the outcome?

**Have you contacted the FSA?**  
 No  Yes  If Yes, what was the outcome?

**Has your complaint been passed to the Financial Ombudsman Service or Court Service?**  
 No  Yes  If Yes, what was the outcome?

The CISI has no regulatory jurisdiction and complaints relating to the delivery of professional services should be made in the first instance to the supplier of those services, in line with such supplier's terms of business. Failure by the firm to provide a satisfactory response or redress to your complaint should then be referred to the Financial Ombudsman Service, or the Financial Conduct Authority (FCA).

NB: Financial services firms which are regulated by the FCA are required to have in place a published complaints handling procedure.

**About the Member**

<b>Name</b>	
<b>Address</b>	
<b>Post Code</b>	
<b>Firm</b>	
<b>Telephone</b>	
<b>Email</b>	

<b>Details of your complaint</b>
Continue on a separate sheet if necessary

*I understand that a copy of this form and any supporting or subsequent correspondence relating to my complaint may be copied to the Member and any appropriate regulatory authority.*

*I authorise you to discuss this complaint with the Financial Conduct Authority, the Financial Ombudsman Service and any other body to whom I or they may have referred this matter and to seek such information as you may deem necessary in order to deal with my complaint against this member of the CISI.*

<b>Signature</b>		<b>Date</b>	
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