

COMPLAINT FORM

RECEIVED _____

COMPLAINT
No. _____

MISSISSIPPI BOARD OF REGISTRATION FOR FORESTERS

PO Box 1884, Jackson, MS 39215-1884 Phone: 601-359-6107 Fax: 601-359-6062

www.cfr.msstate.edu/borf

The practice of forestry without a license is prohibited by law and is a criminal offense. Miss. Code Ann. Section 73-36-35 (1972 as amended).

Unprofessional or unethical conduct in the practice of forestry by a Registered Foresters is prohibited. Miss. Code Ann. Section 73-36-33

In order for the Board of Registration for Foresters to investigate an alleged violation, this Complaint Form should be completed in full, signed by the person making the complaint and notarized.

1. Name of alleged offender: _____

2. Home address of alleged offender: _____

Home telephone: _____

3. Business address of alleged offender: _____

Business telephone: _____

4. Identify the acts or conduct complained of:

5. Include any document, evidence or written supporting or relating to the information identified in Number 3.

6. Name and address of person filing this complaint:

Name _____

Address: _____

Telephone No.: _____

Signature of person making complaint: _____

_____ Date

Affidavit

STATE OF

COUNTY OF

Personally appeared before me with the within named _____ who
acknowledged that they signed and delivered the foregoing instrument, on the day of the
year therein.

Subscribed and sworn to before me this _____ day of _____

My Commission Expires: _____

The Board of Registration for Foresters reserves the right to consider or dismiss this
complaint and to determine if the circumstances require further action and to take that
action, if any, which it deems is appropriate.

The Board of Registration for Foresters reserves the right to fully disclose as a matter of
public record any and all information obtained related to this complaint.