



BUILD ELECTRONICS BETTER

Workforce Development Program Grievance Form

Overview

IPC constantly strives to uphold the highest levels of integrity in all its activities. If you have a complaint regarding any person or entity involved in the IPC Workforce training or certification process, please fill out the form below and describe your concerns in as much detail as possible.

Your identity is required and may be shared to the extent required to complete the investigation of the complaint. IPC takes every grievance seriously and will take every step necessary to ensure the proper conduct of its training and certification processes.

An IPC representative(s) will investigate the grievance and issue an official finding via email to the party who submitted the grievance form within 30 days from the date on which the form was submitted.

Grievant Information

First name:		Last name:	
Address:		Country:	
City:	State/Province:	Postal code:	
Primary telephone:		Primary Email:	

Please describe the action or behavior that is the basis for your grievance. Make sure to include the date(s) of the incident(s) and any other pertinent facts. Please provide as much detail as possible. Add additional pages if necessary.



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Name & Signature

I affirm that everything I have submitted with this grievance form is truthful.

Name:

Signature:

Date:

NOTE: Please email this form and all supporting documentation to certification@ipc.org.

FOR IPC USE ONLY

REVIEWED BY:

DATE:

REVIEWED BY:

DATE:

REVIEWED BY:

DATE:

ACTION: