

## Complaint Form

We take complaints of unprofessional conduct by dental assistants seriously. To make a complaint about a dental assistant, please complete this form and mail it to:

College of Alberta Dental Assistants  
Complaints Director  
166-14315 118 AVE NW  
EDMONTON AB T5L 4S6

All complaints must be signed. We can't consider anonymous complaints.

### Your Information

Name	Phone Number
Address	Alternate Phone Number

### Dental Assistant Information

Dental Assistant's Name	Dentist's Name
Dental Office Name and Address	Dental Office Phone Number

### Date(s) of Incident(s) or Concern(s)

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Please consider this a formal complaint against the dental assistant named above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

