

# North Carolina Board of Dietetics/Nutrition

1000 Centre Green Way, Suite 200, Cary, NC 27513

Phone: 919.861.5580 Fax: 919.882.1776 Email: [info@ncbdn.org](mailto:info@ncbdn.org)

Web: [www.ncbdn.org](http://www.ncbdn.org)

**This form is designed to assist you in filing a complaint regarding one of the following:**

- Licensed dietitian/nutritionist
- Licensed health care professional
- Unlicensed person practicing dietetics/nutrition

You will assist the North Carolina Board of Dietetics/Nutrition in reviewing your complaint by providing as much of the requested information as possible. Enclose on additional pages other information relating to your complaint. (Please print or type)

*Please note: The Board does not have the authority to settle disputes between you and the person named below. Making a complaint to the NCBDN is not the same thing as filing a complaint with an arbitration board or a lawsuit with a civil court.*

Date: \_\_\_\_\_ Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

Your Telephone Number: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Please check the appropriate response:

- The North Carolina Board of Dietetics/Nutrition has my permission to share this complaint with the person named below.  
Signature of complainant/patient \_\_\_\_\_
- The North Carolina Board of Dietetics/Nutrition does not have my permission to share this complaint with the person named below.

*Please note: If this complaint cannot be shared with the person, the Board likely will accept it as information only and may be able to take no further action.*

Information about the person:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Specifics of your complaint:

Short summary of complaint. On the following lines please summarize in one sentence the concern you have regarding this person: \_\_\_\_\_

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