



LOUISIANA BEHAVIOR ANALYST BOARD

8706 Jefferson Highway
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Baton Rouge, LA 70809

Voice: (225) 925-6523
Email: baboard@la.gov
Website: lababoard.org

REQUEST FOR INVESTIGATION

The Board has the authority to conduct investigations and take such actions under the Behavior Analyst Practice Act, in order to protect the people of this state against the unauthorized, unqualified, unethical, and improper application of behavior analysis. The Board is not permitted to give behavior analytic opinions or advice, nor does it have the authority to award damages or render any sort of money judgment. Please visit our website lababoard.org to obtain a copy of the ethical standards adopted by the Board as well as the LA Licensing Law for Behavior Analysts.

INSTRUCTIONS:

1. Complete the entire document.
2. This request for investigation must be typed or neatly printed.
3. Attach **TWO** copies of **ALL** documentation and evidence, which may support your allegations.
4. Attach a completed Release of Information form for each Complainant.
5. Submit all documentation to the address on this letterhead. Upon receipt of your request, the Board's Complaints Coordinator will conduct a review of the information provided herewith.

I. PERSON INITIATING REQUEST (Complainant)

Name _____ Phone _____

Address _____

City, State, Zip _____

Name of Patient (if different) _____ Patients Date of Birth _____

Relationship of Person Initiating Request to the Patient _____

II. PERSON BEING INVESTIGATED (Respondent)

Name _____ Phone _____

Address _____

City, State, Zip _____

III. PLEASE CHECK THE BOX THAT MOST APPROPRIATELY DESCRIBES THE QUALIFICATIONS OF THE PERSON BEING INVESTIGATED:

- Licensed Behavior Analyst
- State Certified Assistant Behavior Analyst
- Registered Line Technician
- Other _____
- I don't know

IV. GENERAL NATURE OF INVESTIGATION REQUEST

- Negligence, incompetence, misconduct, or malpractice in professional work
- Improper Relationships
- Sexual Misconduct
- Substance Abuse
- Failure to release patient records
- Concerns with mistreatment
- Failure to adequately supervise or be supervised
- Problem other than listed above _____

V. DETAILS OF INCIDENT(S)

Include specific details such as, names, dates, particulars about the alleged violation(s), or other pertinent facts. *(If other pages are necessary, please sign and date each one and include **TWO** copies of each additional document you are providing.)*

I, the undersigned, by filing this investigation request, authorize the Louisiana Behavior Analyst Board to investigate and resolve this matter in accordance with the Board's rules and regulations.

SIGNATURE

DATE