

File Number

AUTHORIZATION TO RELEASE COMPLAINT

**Minnesota Board of
Architecture, Engineering, Land Surveying,
Landscape Architecture, Geoscience, and Interior Design
85 East Seventh Place, Ste. 160
Saint Paul, Minnesota 55101
(651) 296-2388**

I hereby authorize the Minnesota Board of Architecture, Engineering, Land Surveying, Landscape Architecture, Geoscience, and Interior Design to provide a copy of my *Statement of Complaint* (including my name), a summary of its contents, and any documentation I provide in support of my *Statement of Complaint*, at the Board's discretion, to _____ ("Respondent"), who is the subject of my complaint. I also hereby authorize the Board to release this information to a third party in the course of the Board's investigation of my complaint. **I understand that I am not legally required to sign this form.** The purpose of this authorization is to facilitate the investigation of my complaint. I am willing to appear as a witness at a hearing if the Board determines there is cause to warrant disciplinary action against the Respondent. This authorization expires one year after this date.

Signature of Complainant

Printed Name of Complainant

Date

I hereby decline to authorize the release of my *Statement of Complaint*, a summary of its contents, my name, and any documentation I provide in support of my *Statement of Complaint* to the Respondent. I understand that if I do not want my *Statement of Complaint*, a summary of its contents, my name, and any documentation I provide in support of my *Statement of Complaint* released to the person against whom my complaint is filed, or if I do not want to be called as a witness at a disciplinary hearing against Respondent, *then the Board may dismiss the complaint.*

Signature of Complainant

Printed Name of Complainant

Date