# **Complaint Process**

The Nebraska Board of Barber Examiners has the authority to license and regulate barbers in the State of Nebraska. Protection of the public is the Boards' primary responsibility. Filing a complaint is a method of informing the Board of actions or activities about individuals and/or barbershops relating to the Barber Act §71-224. By submitting the complaint form below, allows the board to process each complaint consistently with accountability and with confidentiality. Persons using the complaint form are asked to explain the allegations thoroughly in written form and provide copies of any documents that support your complaint. Present evidence in the order in which they happened, using dates and times if possible. Please separate your feeling from the facts and remember to sign the form witnessed by a notary public for formal complaints.

Complaint forms must be filled out completely and mailed to the Board office where it will be reviewed for investigation. All complaints received are acted on.

Nebraska Board of Barber Examiners P.O. Box 94723 Lincoln, Nebraska 68509

# **Frequently Asked Questions**

### How do I file a complaint?

Print the complaint form found on this web site, complete and mail into State of Nebraska Board of Barber Examiner.

## Will the licensee know I have filed a complaint against them?

The complaint is confidential upon reaching the Board office. During the investigation, the licensee will be interviewed without using your name. However, the licensee may determine through questioning who filed the complaint.

### How long will the Complaint process take?

The complaint will be thoroughly reviewed by the Board, which takes time, as all parties will be interviewed. Depending on cooperation by all parties will determine the length of the investigation.

## Will I be called to testify?

Remembering that the Board is responsible for the protection of the public, all cases are important to the Board and are treated with urgency. If the Board finds that it is a violation of the Barber Act §71-224 or other State Statutes, you may be asked to testify at a formal hearing.

#### STATE OF NEBRASKA BOARD OF BARBER EXAMINERS P.O. BOX 94723 LINCOLN, NE 68509 (402) 471-2051 FAX: (402) 328-6231 E-MAIL: barbers.board@nebraska.gov

#### PARTY MAKING THE COMPLAINT:

NAME		TELEP	PHONE ()	
ADDRESS _	<u></u>	<u></u>		7.01
	Street	City	State	Zip Code
PARTY AGA	INST WHOM COMPLA	INT IS MADE:		
NAME	Barber/Establishment			
	Barber, Establishment			
ADDRESS				
	Street	City	State	Zip Code
Will you, as the	he Complainant, willingly	testify in a hearing before the Board of	f Barber Examiners, or in Court sh	ould charges be
•	rom this complaint? [Yes			J

<u>NATURE OF COMPLAINT</u>: State clearly and specifically, all charges against party named above. If additional space is required, provide additional information on the back of this form.

I hereby certify that the above stated charges are true and correct to the best of my knowledge.

NOTARIZED SIGNATURE	DATE
STATE OF NEBRASKA ) COUNTY OF )	SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY OF, 20
SEAL	NOTARY PUBLIC
My commission expires	
OFFICE USE ONLY:	
Date Received	By
Investigator assignedI	Date investigation completed Date of review