

**COMPLAINT FORM – Members’ Code of Conduct**

If you consider that there has been a breach of the Members’ Code of Conduct by a Member, co-opted member (“Members”) on one of the Council’s committees, or the Mayor of the Combined Authority and you wish to make a complaint, please complete this form and then send or email it to:

The Monitoring Officer

York and North Yorkshire Combined Authority

County Hall

NORTHALLERTON

North Yorkshire

DL7 8AD

email: [monitoring.officer@yorknorthyorks-ca.gov.uk](mailto:monitoring.officer@yorknorthyorks-ca.gov.uk).

Please note that the Audit and Governance Committee can only consider complaints about the behaviour of individual Members of the Combined Authority and has no jurisdiction to consider complaints about the Combined Authority as a whole or Authority employees. If you wish to make a complaint about the Combined Authority as a whole, or one of its services, please send your complaint to the Head of Paid Service at the above address. Further information is available on the Combined Authority’s website.

**Your Details**

1. Please provide us with your name and contact details:

|  |  |
| --- | --- |
| **Title:** |  |
| **First Name:** |  |
| **Last Name:** |  |
| **Address:** |  |
| **Contact telephone number:** |  |
| **Email address:** |  |

It is important to provide a name and contact address. Please note that the Combined Authority will not take any action in relation to anonymous complaints unless there is a significant public interest in doing so.

The Member(s) who is/are the subject of your complaint (‘the subject Member(s)’) will be advised of the complaint and copied into any relevant correspondence (including this completed complaint form) received from you.

1. Please confirm the status in which you are making this complaint:

🞏 Member of the public;

🞏 An elected or co-opted Member of the Combined Authority;

🞏 Member of Parliament;

🞏 Combined Authority Monitoring Officer;

🞏 Other Authority Officer; or

🞏 Other (please specify)

1. Please provide us with the name(s) of the Member(s) you believe to have breached the Members’ Code of Conduct:

|  |  |  |
| --- | --- | --- |
| **Title** | **First name** | **Last name** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. A copy of the Combined Authority Code of Conduct is published on the Authority’s website. Please indicate which paragraphs of the relevant Code of Conduct you believe the Member(s) to have breached:

|  |  |
| --- | --- |
| **Councillor** | **Code paragraph alleged to have been breached** |
|  |  |
|  |  |
|  |  |

1. Please explain in this section (or on a separate sheet) **what the Member has done** whichyou believe breaches the Code of Conduct.

If you are complaining about more than one Member you should clearly explain what each individual person has done which you believe breaches the Code.

It is important that you provide all the information you wish the Monitoring Officer to take into account when deciding, in consultation with the Authority’s Independent Person for standards, whether to take any action in respect of your complaint.

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| --- |
| **Please provide us with the details of your complaint. Continue on a separate sheet if necessary.** |

Signed:…………………………………………Date:…………………………………………….