



Society of Actuaries in Ireland

**ALLEGATION OF MISCONDUCT  
MADE UNDER THE RULES OF THE DISCIPLINARY SCHEME**

**SECTION ONE**

**1. YOUR NAME**

Surname:.....

First Name(s):.....

Mr ..... Mrs ..... Miss ..... Ms ..... Other (please specify).....

Address:.....

.....

.....

.....

Telephone numbers: home: ..... work: .....

mobile: .....

Which would you prefer us to use if we need to contact you by telephone?.....

**SECTION TWO**

**2. DETAILS OF THE ACTUARY OR ACTUARIES ABOUT WHOM YOU WISH  
TO MAKE AN ALLEGATION OF MISCONDUCT**

(a) Surname: .....

First

Name(s):.....

Address (if known):

.....

.....

.....

.....

(b) Surname:.....

First Name(s): .....

Address (if known): .....  
.....  
.....  
.....

**SECTION THREE**

**3. DETAILS OF YOUR ALLEGATION OF MISCONDUCT**

A. Have you already raised your allegation with the actuary or actuaries concerned?

Yes..... No .....

If yes, please state when you raised it: .....

and what the outcome was:

.....  
.....  
.....  
.....

B. Have you raised it with any other organisation or person?

Yes..... No .....

If yes, please give name of organisation or person:

.....

and the date when you raised it: .....

and what the outcome was:

.....  
.....  
.....  
.....

C. When did the action(s) that you allege constitute misconduct take place?

.....

If this was more than 5 years ago, please say why there has been a delay in making the allegation:



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**SECTION FOUR**

**4. OTHER PEOPLE WITH INFORMATION TO HELP AN INVESTIGATION**

Please give the names and addresses of any other people who you believe may be able to help us to investigate your allegation:

- a.....  
.....  
.....
- b. ....  
.....  
.....

<b>SECTION FIVE</b>
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**5. DOCUMENTS TO SUPPORT YOUR ALLEGATION**

Please send us **copies** of any papers that you have which may support your allegation. **Please do not send original documents.** Please list below what you have sent:

- a.....  
.....  
.....
- b. ....  
.....  
.....
- c.....  
.....

.....  
Have you written to the Society of Actuaries in Ireland before about this matter?

Yes or No? .....

*If "Yes":*

By letter or email? ..... On what date? .....

To whom was the correspondence addressed (name of person)? .....

**Please sign and date your completed form:**

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

**Please return this form to:**

Ramona Dolan  
Head of Professional Affairs  
Society of Actuaries in Ireland  
75 Merrion Square South  
Dublin 2  
D02 KP92

Telephone: 087 9008549 e-mail:  
[Ramona.Dolan@actuaries.ie](mailto:Ramona.Dolan@actuaries.ie)