



Accredited Agency / Approved Person Information

Name of Accredited Agency / Approved Person (including doing business as):

Address of main site: Street:

City: State: Zip Code:

Phone Number: Email Address:

Purpose, Dates of Submission, and Submission Process

The purpose of the Semi-Annual Report on Complaints (SARC) is to provide the Accrediting Entity with information on complaints received by the Agency/Person (*person is defined as an individual or a private, for-profit entity*), (including complaints regarding the use of its supervised providers) during the preceding six-month period. The report below is designed to collect the information required to demonstrate substantial compliance with 22 CFR 96.41(b),(f),(g) and (h).

The Semi-Annual Report on Complaints is due to IAAME within the ten (10) business days following April 1st and October 1st each calendar year.

Agencies/Persons must complete the Semi-Annual Report on Complaints, accompanying summary, data reports, and other documentation, then sign, and upload it to the IAAME portal using the Agency/Person’s IAAME portal account.

Report on Complaints Dates of Coverage

April 1ST submission covering October 1, _____ to March 31, _____.

OR

October 1ST submission covering April 1, _____ to September 30, _____.

Total Number of Complaints Against Accredited Agency/Approved Person

Total number of complaints filed against the Agency/Person (including complaints regarding the use of the ASP’s foreign and domestic supervised providers) during the 6-month period covered by this report: _____ (if none, enter 0)



• **Complaints Against ASP Regarding Use of Supervised Providers in the U.S.**

Please utilize the following section to provide information regarding any complaints filed against the ASP *regarding its use of Supervised Providers in the United States.*

The Agency/Person utilizes Supervised Providers in the U.S.? Yes No

If yes, number of current supervised Providers in the U.S.

Has the Agency/Person received complaints regarding its use of a current Supervised Provider (during the six-month period covered by this report) in the U.S.? Yes No

Of total complaints reported (in Total Complaints section above), how many are regarding the use of current Supervised Providers in the U.S. during the 6-month period covered by this report: (if none, enter 0)

• **Complaints Against ASP Regarding Use of Foreign Supervised Providers**

Please utilize the following section to provide information regarding any complaints filed against the ASP *regarding its use of Foreign Supervised Providers.*

The Agency/Person utilizes Foreign Supervised Providers? Yes No

If yes, number of current Foreign Supervised Providers

Has the Agency/Person received complaints regarding its use of a current Foreign Supervised Provider (during the six-month period covered by this report)? Yes No

Of total complaints reported (in Total Complaints section above), how many are regarding the use of current Foreign Supervised Providers during the 6-month period covered by this report: (if none, enter 0)

Summary Information

In keeping with the standards set forth in 22 CFR 96.41 (b), (f), (g), and (h), the Agency/Person must complete the Semi-Annual Report on Complaints which includes a summary of complaint(s). The summary must include:

- The total number of complaints regarding any of the services or activities of the Agency/Person (including complaints regarding its use of Supervised Providers in the U.S. and Foreign Supervised Providers) which are related to compliance with the Convention, the IAA, the UAA or the regulations implementing the IAA, or UAA.
- A description of how each complaint was resolved.



Semi-Annual Report on Complaints

- Findings and subsequent quality improvement activities resulting from the review of complaint data and information. Quality improvement information must include:
 - The Agency/Person’s review of the complaint,
 - Analysis of the information, including any discernable patterns of complaints received, and
 - What systemic changes, if any, were made or are planned by the Agency/Person in response to such patterns.

There have been complaints filed against the Agency/Person (including complaints regarding its use of Supervised Providers in the U.S. and Foreign Supervised Providers) during the 6-month period covered by this report. The Agency/Person therefore has attached to this report the summary of each complaint(s) which includes all information as required in 96.41 (b), (f), (g) and (h).

OR

There have been no complaints filed against the Agency/Person (including complaints regarding its use of Supervised Providers in the U.S. and Foreign Supervised Providers) during the 6-month period covered by this report. The Agency/Person is therefore not required to provide a summary of complaint(s).

The Agency/Person acknowledges that per 22 CFR 96.41 (f), the Agency/Person is required to provide a copy of this report to the Department of State (adoption@state.gov) following IAAME’s review and approval of this Semi-Annual Report on Complaints.

Signature

By signing this document, I attest that under penalty of perjury, the above information and attached summary information is true and accurate.

Authorized Signature
for Accredited Agency/Approved Person

Signature of Governing Body Chair

Printed/Typed Name of Signatory

Printed/Typed Name of Governing Body Chair

Title of Signatory

Title of Governing Body Chair

Date of Signature

Date of Signature