

Louisiana Mosquito Control Association

Code of Ethics & Professional Conduct Violation Report Form

Modified on: 06/05/2025

Adopted on: 03/11/2025

This form is for reporting suspected violations of the LMCA Code of Ethics or Professional Conduct by any individual associated with LMCA (including members, staff, contractors, vendors, exhibitors, or attendees). All reports will be reviewed confidentially and handled with care by the LMCA Board.

Submit to: LMCA President, Vice President, Secretary-Treasurer, or LMCA Board Member

Email: louisianamosquito@gmail.com

Section 1: Type of Report

☐ Code of Ethics Violation

☐ Harassment

☐ Other (please specify): _____

Section 2: Reporter Information

Your Name: _____

Are you the individual affected? ☐ Yes ☐ No

Affiliation (e.g., employer, agency): _____

Phone or Email: _____

Section 3: Affected Party (if different from reporter)

Name: _____

Contact Information: _____

Affiliation: _____

Section 4: Accused Party

Full Name: _____

Affiliation (Employer or Institution): _____

Section 5: Incident Description (attach additional pages, if necessary)

Please describe the incident in detail, including:

- What occurred
- When and where it happened
- Who was involved
- How LMCA policy or ethics were violated
- Any actions you have taken in response

Section 6: Additional Information

Has the accused's employer/organization been notified?

☐ No ☐ Yes (please describe):

Are there known conflicts of interest related to this matter?

☐ No ☐ Yes (please explain):

Witnesses (names, affiliations, contact info):

Section 7: Desired Outcome

What would you like to see as a result of this investigation?

Section 8: Supporting Documentation

☐ Supporting evidence is attached (e.g., emails, screenshots, messages)

Section 9: Consent & Affirmation

I affirm that the information provided in this report is accurate to the best of my knowledge. I understand that LMCA will treat this matter with appropriate confidentiality and investigate in accordance with its policies.

Signature: _____ Date: _____

Your Privacy and Protection: All reports will be treated confidentially and only shared with individuals necessary for a fair investigation. Retaliation against reporters or witnesses is strictly prohibited. Anonymous reports are accepted but may limit LMCA's ability to respond effectively.