National Institute for Health Specialties

United Arab Emirates

INSTITUTIONAL & PROGRAM ACCREDITATION

NIHS Accreditation

Procedures Manual

Version 2026

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1 Introduction to NIHS Accreditation System

1.1 About NIHS

On July 17, 2014, the Cabinet issued Ministerial Decree No. (28) to establish the National Institute for Health Specialties (NIHS). According to Article (5), NIHS is entrusted with several key responsibilities:

- Developing standards for specialized health programs and accreditation criteria for health institutions dedicated to specialized training.
- Evaluating and approving healthcare institutions across the country to ensure they meet the standards for specialized training and advanced medical education.
- Promoting the quality of specialized medical education, training, and postgraduate studies by accrediting hospitals, medical centers, and specialized programs.
- Recognizing hospitals and medical centers that meet approved standards, allowing them to participate in specialized training programs.
- Approving the curriculum designed for specialized training in the country.

To fulfill its mission, NIHS has implemented a comprehensive accreditation system, establishing National Accreditation Standards to guide hospitals and health institutions in offering specialty programs that lead to postgraduate qualifications.

1.2 General Requirements for Institutional and Program Accreditation

NIHS sets standards for accrediting hospitals and health sponsoring institutions to ensure quality residency and fellowship programs. Accreditation is based on five key areas:



The process includes an on-site evaluation of these areas to verify compliance. Accredited institutions must report regularly on program details, faculty, and trainee performance and register trainees on the NIHS website. They must also pay applicable fees, maintain communication with NIHS, and adhere to all accreditation requirements to retain their status.

1.3 The Accreditation Cycle

NIHS awards a five-year accreditation to institutions that meet all established standards for residency and fellowship training. As the end of the accreditation period approaches, accredited institutions must apply for re-accreditation and undergo a full survey and assessment process to ensure they continue to meet NIHS standards.

The re-accreditation process involves a comprehensive review by NIHS surveyors, who provide a technical report to the Central Accreditation Committee. Based on this report, NIHS may:

Renew Accreditation for Five Years

› If the institution continues to meet all standards, a full five-year re-accreditation is granted.

Grant Conditional Accreditation

› If some standards need improvement, NIHS may award conditional accreditation for a shorter period, requiring the institution to fulfill an action plan within a specified timeframe to maintain accreditation.

Freeze Accreditation

› If an institution fails to meet the standards, NIHS may freeze accreditation, suspending its ability to host residency and fellowship programs.

> Institutions that are unsuccessful in gaining or maintaining accreditation have the right to appeal the decision through the NIHS appeals process, where they can present their case for reconsideration (see **Section 10: Appeals**).

2 NIHS Accreditation Process

The NIHS Central Accreditation Committee (CAC) has outlined a structured accreditation process, defining the roles and responsibilities of each party involved:

Central Accreditation Committee (CAC)

Formed by the NIHS Secretary General, including members from Specialized Scientific Committees.

RESPONSIBILITIES

- Establish and periodically review accreditation procedures.
- Review and evaluate accreditation applications and relevant documents.
- Recommend institutional site visits and select appropriate surveyors.
- Ensure sponsoring institutions meet NIHS standards.
- Provide accreditation status recommendations to the NIHS Secretary General.

Accreditation Surveyors Team

Conducts on-site visits to sponsoring institutions and programs.

RESPONSIBILITIES

- Interview relevant staff, audit submitted documents and verify compliance with NIHS standards.
- Inspect facilities and verify the presence of necessary equipment, systems, and staff.
- Request additional information if needed and produce a detailed site visit report.
- Remain available for re-evaluation if necessary.

NIHS Accreditation Unit

Manages and coordinates the accreditation process.

RESPONSIBILITIES

- Counsel the sponsoring institutions on the accreditation process.
- Review applications, coordinate site visits, and ensure all required data is collected.
- Present site visit findings to the CAC for final recommendations.
- Communicate accreditation decisions to the sponsoring institution.
- Follow up on semi-annual reporting and conduct the auditing process.

Institution (Applicant)

RESPONSIBILITIES

- Complete the online application form with the required documents.
- Conduct a self-assessment and pay the necessary fees.
- Organize the site visit and ensure timely submission of data.
- Adhere to NIHS accreditation policies and procedures.
- Maintain the documentation and accreditation requirements.

This collaborative approach ensures that all parties contribute to maintaining high standards in medical training and residency programs.

NIHS Institutional and Program Accreditation: Four Steps

01
Apply
› **Send** Letter of Intent to NIHS Secretary General.
› **Complete** institution and program accreditation online application forms.
› **Complete** institutional and program self-assessment rubrics.
› **Pay** the fee.
› **Submit** all required documents.

02
Review
› **Review** the application and relevant documents.
› **Select** accreditation surveyors.
› **Request** more information and data.
› **Ensure** all documents are submitted.

03
Conduct Site Visit
› **Carry** out the site visits.
› **Review** documents and files.
› **Prepare** detailed technical accreditation report.

04
Obtain Accreditation
› **Review** the final accreditation report.
› **Put** accreditation recommendations.
› **Make** accreditation decision.
› **Follow** up on accreditation status.

Accreditation Fees
Institutions must pay NIHS institution and program accreditation fees prior to obtaining the accreditation. All the information related to the fees will be provided by NIHS.

3 Application

3.1 How to Apply for Institutional and Program Accreditation

Institutions seeking NIHS accreditation must complete and submit an online application through NIHS E-services. Along with the application, institutions need to provide supporting documents that demonstrate compliance with NIHS accreditation standards, such as policies, procedures, and systems in place.

Applicants must also complete a self-assessment rubric to evaluate their readiness, identify any gaps, and work on addressing them. The NIHS accreditation team will review only complete applications and may request additional information if anything is missing or unclear.

Institutions should carefully fill out each section of the application form. For any questions, they can reach out to the NIHS accreditation team. Supporting documents must be submitted in English, except official documents written in Arabic, which are acceptable in Arabic only. All pages of the application and supporting documents should be stamped and signed by an authorized person at the institution.

3.2 Review of Accreditation Application

Once an institution submits its application, the NIHS Accreditation Unit forwards it to the Central Accreditation Committee for technical review. The committee examines the application and supporting documents to decide whether it meets NIHS accreditation standards.

If additional information is needed, the committee may request it from the institution. If the application does not meet NIHS requirements, the Accreditation Unit will notify the institution of the rejection, and the application will be closed.

If the application meets the standards, the committee will appoint a team of accreditation surveyors to conduct a site visit. At this stage, the institution must pay the NIHS accreditation fee as per the regulations.

> If an institution withdraws its application, it must wait **one year** before reapplying for accreditation.

3.3 Renewal of Accreditation Applications

Accredited institutions must apply for re-accreditation every five years by completing the same application form, selecting the “renewal” option, and undergoing a full re-accreditation review. Six months before accreditation expires, the NIHS Accreditation Unit will contact the institution, providing instructions, a list of required documents, and details on fees.

Institutions should carefully complete all parts of the application form. Supporting documents must be in English, except official documents in Arabic, which may be submitted as-is. All pages should be stamped and signed by an authorized representative.

A re-accreditation review will only proceed if NIHS receives the complete application and payment by the specified deadline. If the institution does not complete the re-accreditation process before the current accreditation expires—and has not received an extension from NIHS—the accreditation will be withdrawn.

3.4 Self-Evaluation Report

Before the site visit, institutions must complete and submit a self-assessment rubric that evaluates their quality assurance practices against NIHS standards. This report, included with the accreditation application, should be completed in English and provide detailed responses with supporting evidence.

Accreditation surveyors will use the same rubric during their assessment, so it is essential for institutions to ensure they meet all the standards outlined in it.

4 Conducting Site Visit

4.1 Site Visit Process

To gain new or renewed accreditation, institutions must complete a site visit assessment, conducted by independent, NIHS-approved surveyors chosen by the Central Accreditation Committee. The site visit ensures the institution meets NIHS standards and also allows surveyors to offer guidance for quality improvement.

Once the Central Accreditation Committee authorizes the site visit, the NIHS team will confirm the date with the institution and surveyors within three months. Virtual assessments may also be used if the institution is prepared for this format.

4.2 Selection of Accreditation Surveyors Team

The accreditation surveyors' team are specialists formed by the NIHS for accrediting sponsoring institutions and programs.

4.2.1 NIHS Selection Criteria for Accreditation Surveyors Team

The following conditions must be met by each member of the accreditation surveyors' team:

CONDITIONS

- Complete NIHS introductory assessment and evaluation courses.
- Obtain consultant status in one of the health specialties or equivalent qualifications as relevant.
- Obtain specialized training with at least 3 years of experience.
- Carry professional experience in medical education (medical and/or surgical specialties).
- Provide reference/recommendation letters from DIOs or Training Manager.
- Grant not less than 5 days yearly to conduct site visits.
- Provide evidence of prior professional development or training workshops on assessment.
- Continue developing their skills and take refresher assessment and accreditation courses to maintain their membership with NIHS.
- Implement NIHS Accreditation Policies, Systems and Procedures.
- Sign the Conflict-of-Interest Declaration form and protect the confidentiality of data and documents.

4.2.2 Procedures for Registering Accreditation Surveyors Team

Health professionals and consultants can apply to join the NIHS accreditation surveyors' community. Approved surveyors receive a membership certificate valid for two years. To apply, visit NIHS E-services on the NIHS website. For detailed steps, see the **Registration of Accreditation Surveyors Procedure** (page 17) and the **Accreditation Surveyors Registration Form** (page 25).

4.3 Site Visit Preparation

The NIHS Accreditation team will coordinate the site visit and send the institution written confirmation with the visit dates, names of the surveyors, and a list of documents to prepare. The institution should

inform its staff about the visit, be ready for interviews, and respond to any questions from the surveyors. NIHS will provide the site visit schedule in advance.

At the end of the visit, the surveyors will create a detailed report with their findings and recommendations. Additional evidence may be requested during the visit to support the accreditation process. The institution is expected to be fully prepared with all required information and documentation.

The institution is expected to provide the following:

01
› **Reception** at the entrance to the health establishment under site visit.

02
› **Provide** a suitable room for office work and interviews.

03
› **Prepare** all required documents and information.

04
› **The** designated institutional official must be fully available for the accreditation surveyors' team for the duration of the site visit.

05
› **Notify** those involved in the qualitative interviews and facilitate interviewing them.

06
› **Immediate** access to relevant buildings and places for inspection purposes.

During the visit, the accreditation surveyors are authorized to inspect all relevant sites and buildings and to speak with administration, trainers, trainees, employees, and other related personnel. The institution is expected to fully cooperate in this process.

5 Site Visit Reporting

At the end of the site visit, the surveyors will each prepare their reports, then meet to discuss findings and agree on judgments and action points. The team leader will compile these into a final accreditation report, signed by all surveyors involved, and submit it to the Central Accreditation Committee through the accreditation unit team for review.

5.1 The Report Format

The accreditation surveyors will submit their report using the institutional and program accreditation rubrics, which include:

- **General Information:** Basic details about the institution or program.
- **Standards Compliance:** An assessment of how well the institution meets each standard, rated as "Met," "Partially Met," or "Not Met."
- **Overall Assessment with Action Points:** A summary of findings with recommended actions.

5.2 Action Points

The accreditation surveyors will include feedback and action points in the site visit report, which the Central Accreditation Committee will consider when reviewing the application. The institution will be given a set period to review, respond, and address these action points to secure or maintain accreditation.

5.3 Reviewing the Reports

The Central Accreditation Committee will review the site visit report during a meeting and may contact the surveyors for additional information or clarification. Once the review is complete, the committee will submit their recommendations to the NIHS Secretary General.

6 Accreditation Decisions

6.1 Accreditation Decisions

The Central Accreditation Committee reviews the report from the accreditation surveyors and may meet with them for further clarification. If needed, the committee can arrange for a second site visit by a reconstituted surveyor team to address any remaining issues. The committee will submit its recommendations within two months of receiving the completed report.

Based on these recommendations, the NIHS Secretary General will make the final decision, with the option to request further review by the committee if necessary. The Secretary General may choose one of the following actions:

	Grant institutional or program-level accreditation for 5 years.
	Grant initial accreditation for 2 years (for new institutions).
	Grant conditional institutional or program-level accreditation for 1 year.
	Modify training capacity in cases of program-level accreditation.
	Notify of a possible freeze of accreditation (warning).
	Not to grant accreditation.
	Freeze accreditation.
	Withdraw accreditation.

■ Grant ■ Conditional or corrective ■ Refusal, freeze or withdrawal

6.2 Refusal, Suspension or Withdrawal of Accreditation

The Central Accreditation Committee may recommend refusing, suspending, or withdrawing accreditation if the site visit report shows that the institution does not meet or maintain required standards. The NIHS accreditation team will inform the institution of the committee's recommendation, with a clear explanation provided in the report. The institution has the right to appeal the decision.

6.3 Freezing Accreditation

If an institution fails to meet accreditation standards, the Central Accreditation Committee may recommend freezing its accreditation. The institution will be given an **eight-month grace period** to address the issues, along with a warning letter detailing the required actions. During this freezing period, the institution cannot accept new trainees.

If the institution meets all requirements within the grace period, the committee will recommend restoring full accreditation, allowing the institution to resume enrolling trainees. If the requirements are not met, the committee may recommend canceling the accreditation, and NIHS will arrange for current trainees to transfer to another accredited institution. NIHS will inform the institution of the final decision before the grace period ends.

7 After Obtaining Accreditation

7.1 Maintaining Accreditation

Accredited institutions must uphold NIHS standards and comply with all relevant laws and regulations related to accreditation, fully cooperating with NIHS to maintain their status.

7.2 Continuing Accreditation Process

NIHS accreditation is typically granted for five years, although the Central Accreditation Committee may recommend a shorter period based on the site visit report. To remain accredited, institutions must apply for continuing accreditation and complete a full site visit before their current accreditation expires. Failure to submit the application on time will result in the withdrawal of accreditation.

8 Awarding Accreditation Certificates

Institutions that meet accreditation requirements will receive two types of certificates: one for institutional accreditation and another for residency and fellowship program accreditation by specialty. Both certificates will be issued and signed by the NIHS Secretary General.

9 Training Capacity Modification

Accredited institutions may request to modify their training capacity, provided the request is made at least three months before new trainee admissions. To apply, institutions should complete the NIHS Training Capacity Modification form (available on the NIHS website) and email it to the NIHS accreditation unit.

The Central Accreditation Committee will review the request within two months, potentially requesting additional information. Approval for capacity modification depends on the institution's internal resources. The full procedure is in the **Training Capacity Modification Procedure** (page 21) and the **Training Capacity Modification Form** (page 30).

10 Appeals

If NIHS decides to refuse or withdraw accreditation, the institution may appeal by completing the NIHS Appeal form, available on the NIHS website. The form, along with supporting details, should be submitted to the accreditation team. The Central Accreditation Committee will review the appeal and respond to the institution within one month. The full procedure is in the **NIHS Appeal Procedure** (page 22) and the **Appeal Form** (page 32).

11 Complaints

If an institution has a complaint about the accreditation process, it can submit the NIHS Complaint Form, available on the NIHS website, with relevant details to the NIHS accreditation team. The team will investigate and report to the NIHS Secretary General, who will issue a written resolution within five working days. For technical complaints, the Secretary General may refer the issue to the appropriate committee for corrective action.

Verbal complaints are also accepted, but the institution will need to follow up with a written complaint. The NIHS accreditation team will inform the institution of the decision. The full procedure is in the **NIHS Complaints Procedure** (page 23) and the **Complaints Form** (page 33).

A1 Appendix 1: Procedures

This appendix sets out each NIHS accreditation procedure as a flowchart. Each chart begins at Start and follows the steps and decisions through to End.

Start End Step Decision Outcome

Institutional and Program Accreditation
› Page 16

Registration of Accreditation Surveyors
› Page 17

Accreditation Site Visit
› Page 18

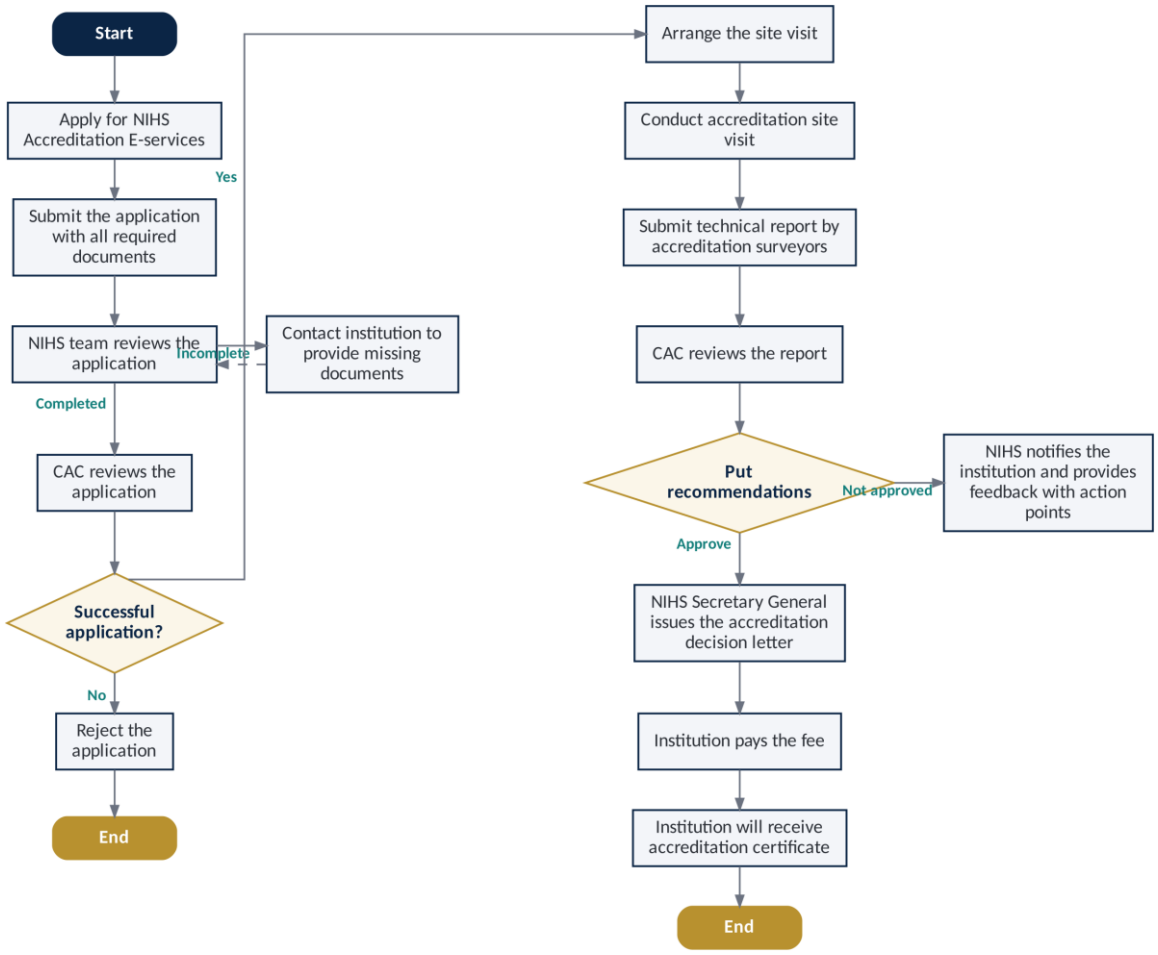
Institutional and Program Accreditation Decision
› Pages 19–20

Training Capacity Modification
› Page 21

Appeal
› Page 22

Complaints
› Page 23

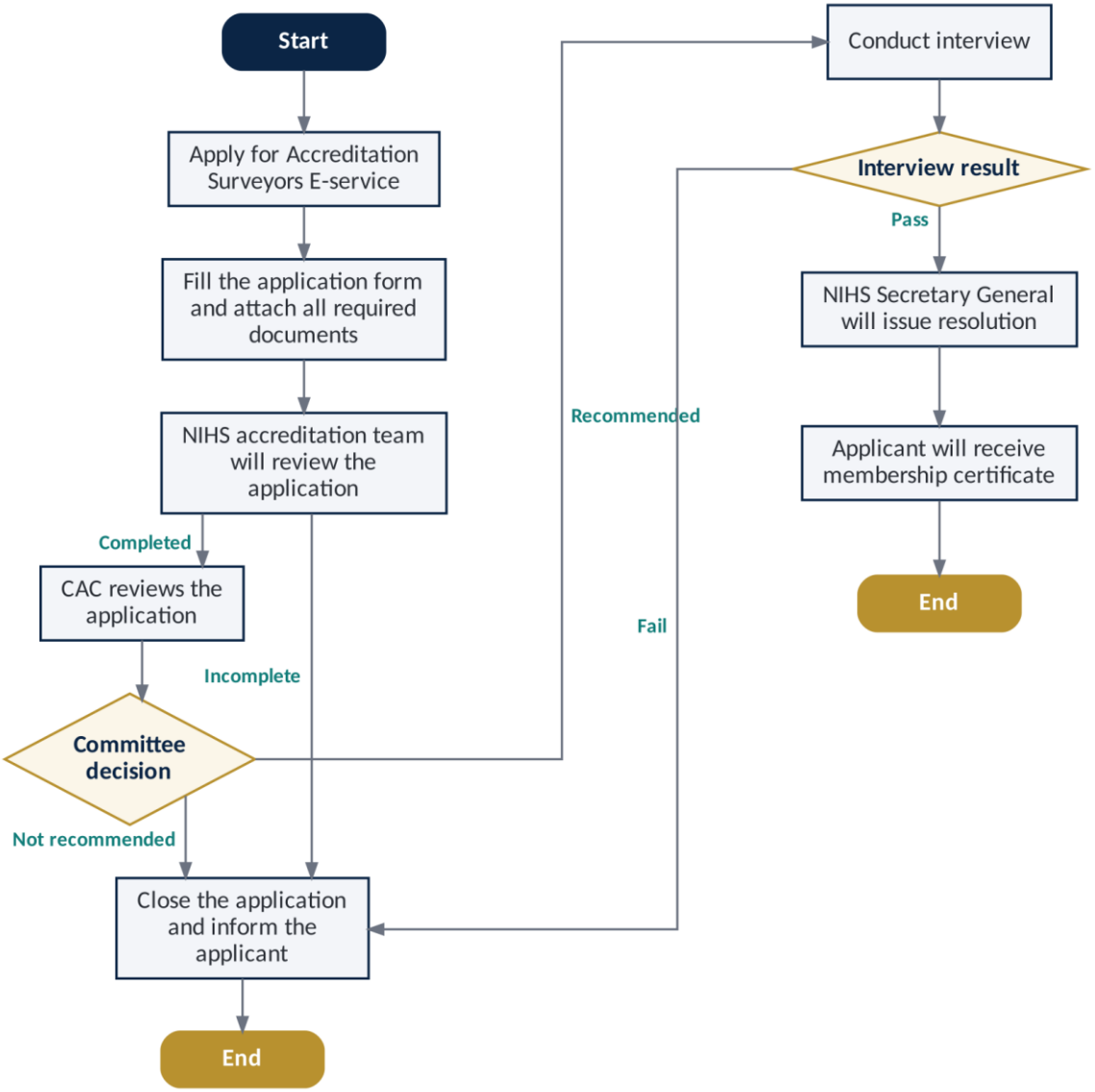
Institutional and Program Accreditation Procedure



Institutional Accreditation E-service link:
https://nihs.uaeu.ac.ae/en/institutional_accreditation_service/index.shtml

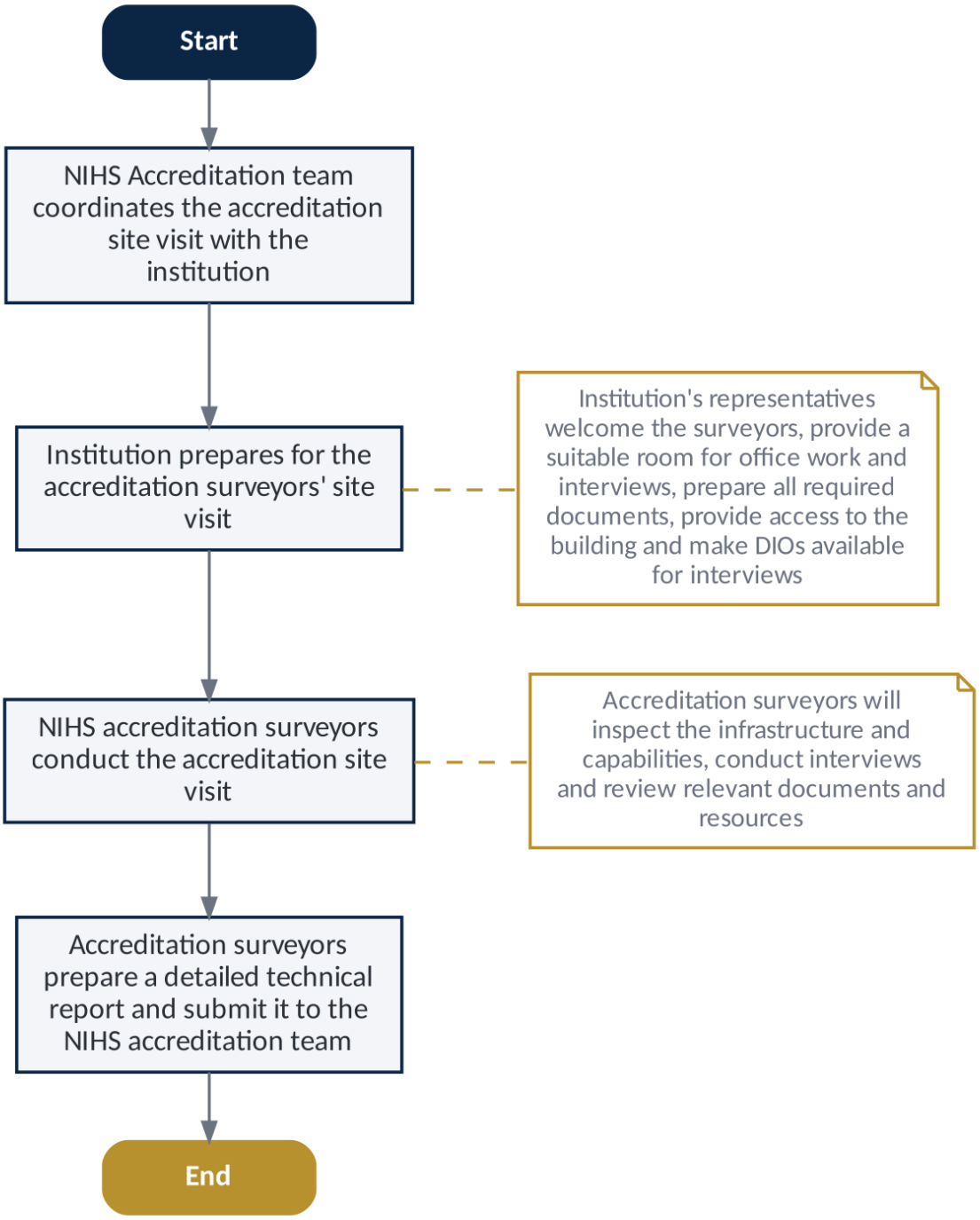
Program Accreditation E-service link:
https://nihs.uaeu.ac.ae/en/program_accreditation_service/

Registration of Accreditation Surveyors Procedure

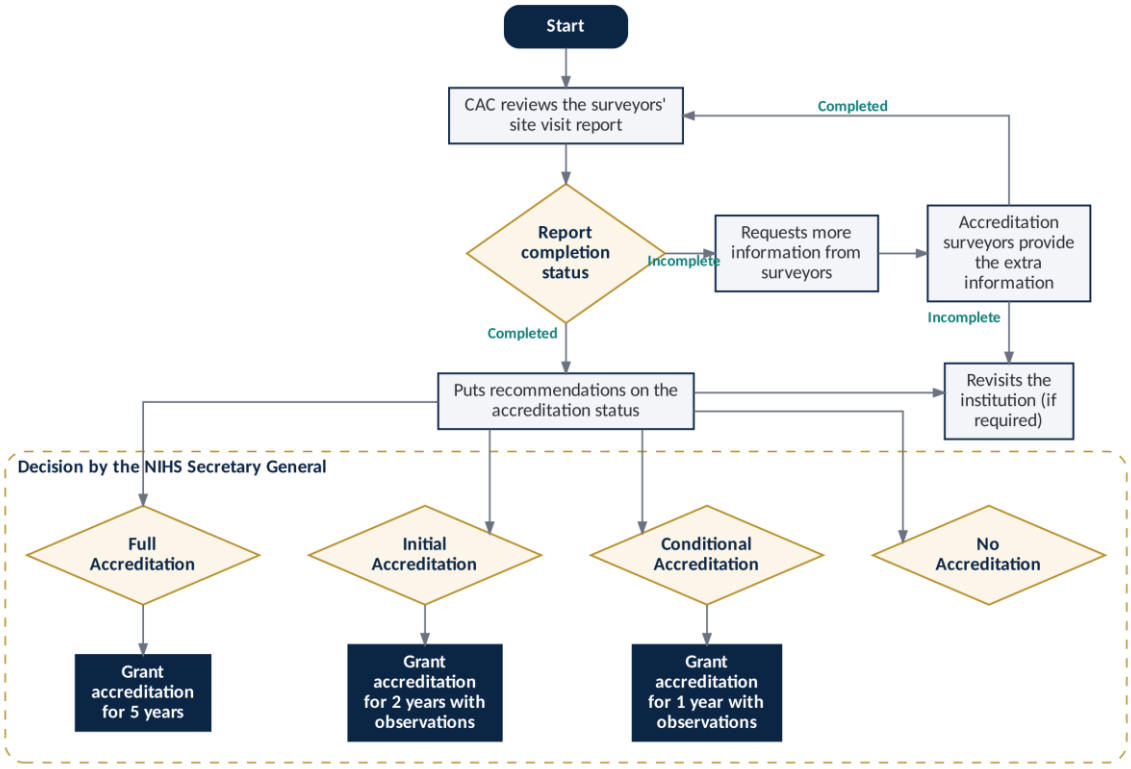


Registration of Accreditation Surveyors E-service link:
https://nihs.uaeu.ac.ae/en/registration_accreditation_surveyors/

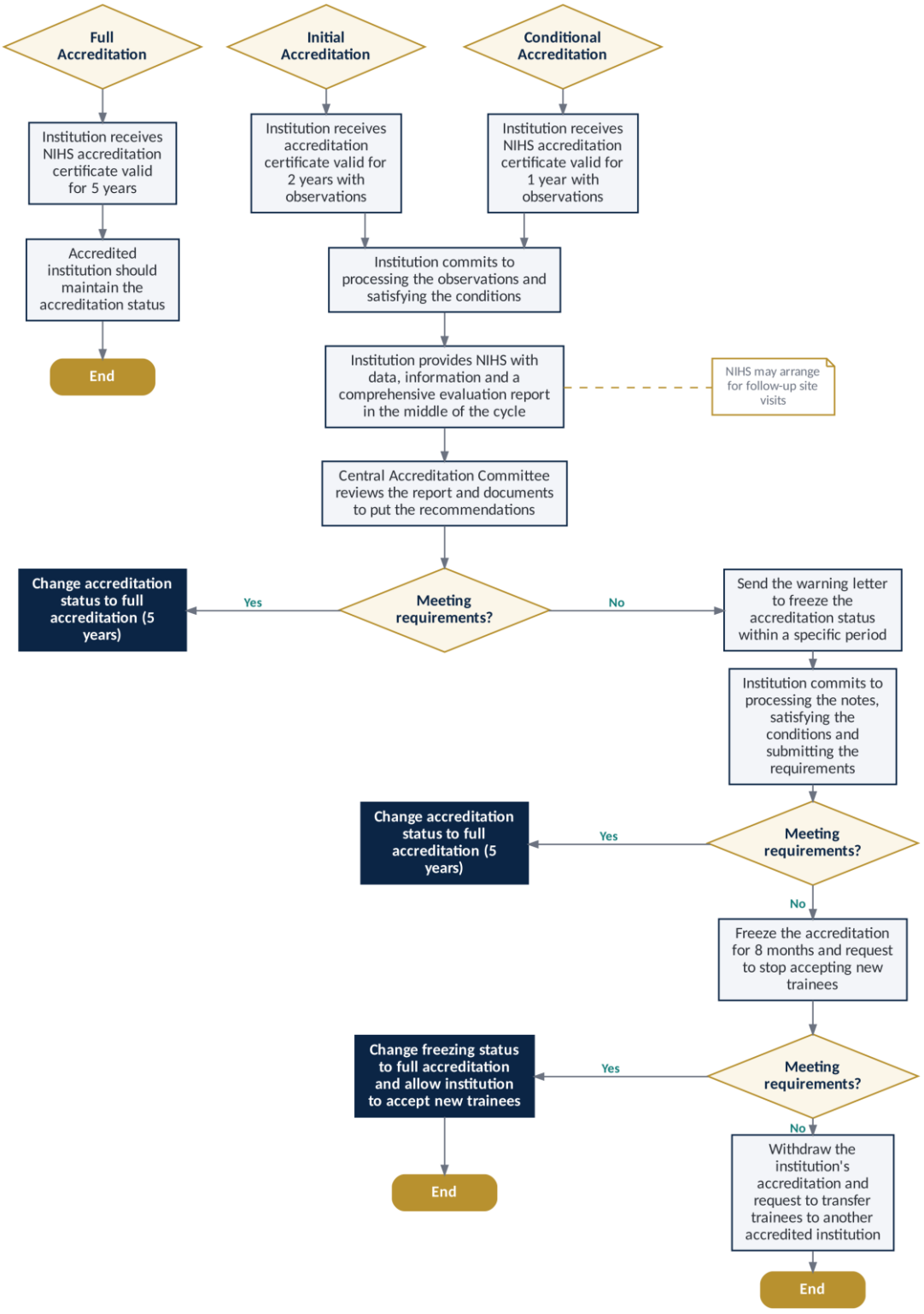
NIHS Accreditation Site Visit Procedure



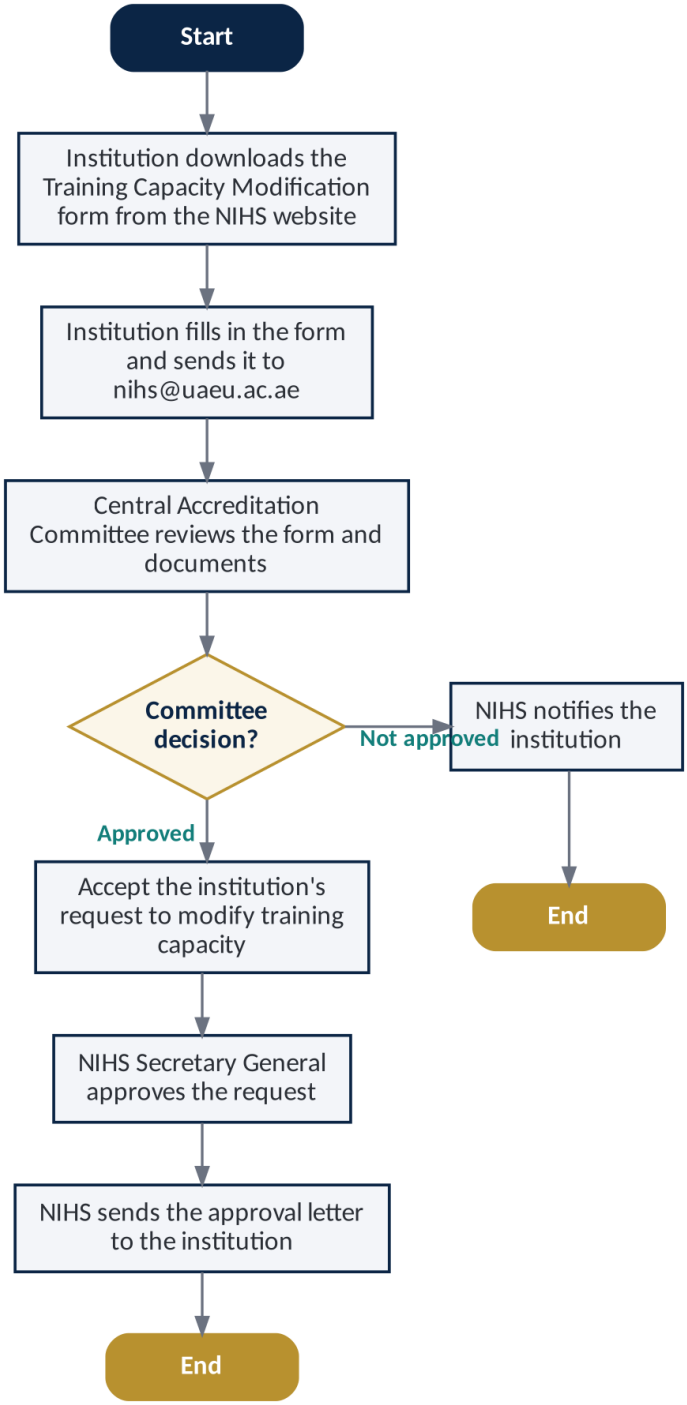
NIHS Institutional and Program Accreditation Decision



NIHS Institutional and Program Accreditation Decision (continued)

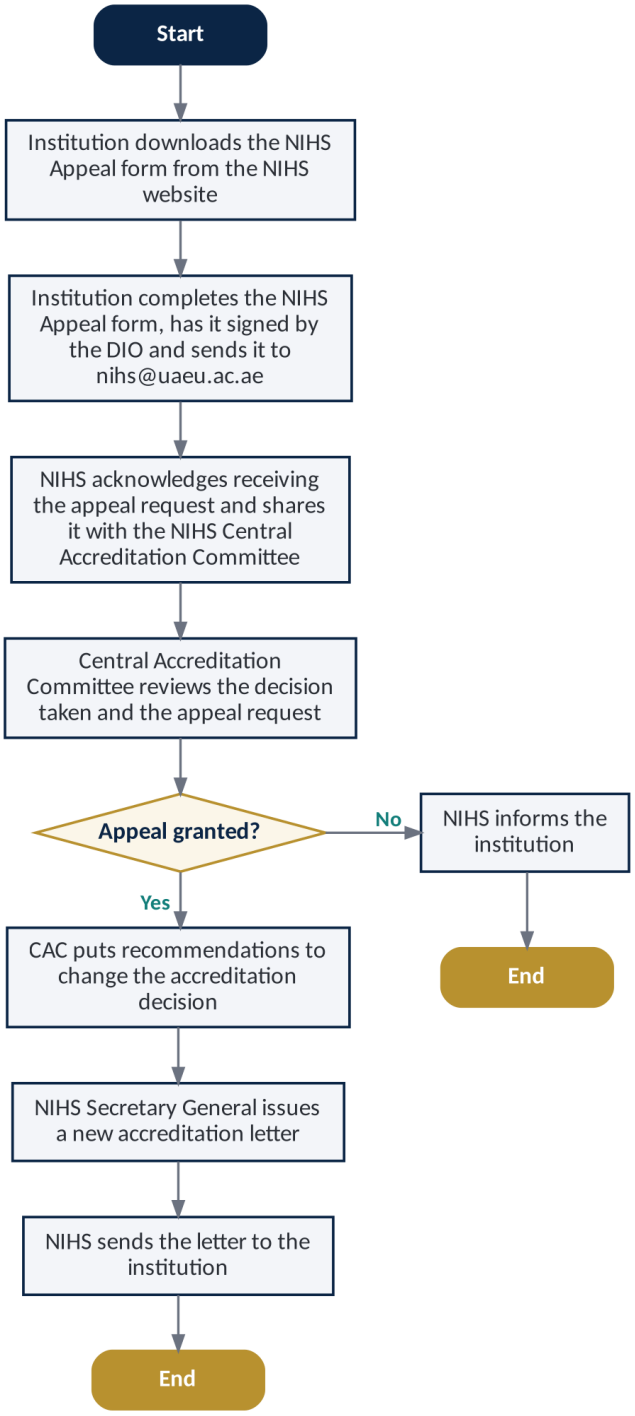


NIHS Training Capacity Modification Procedure



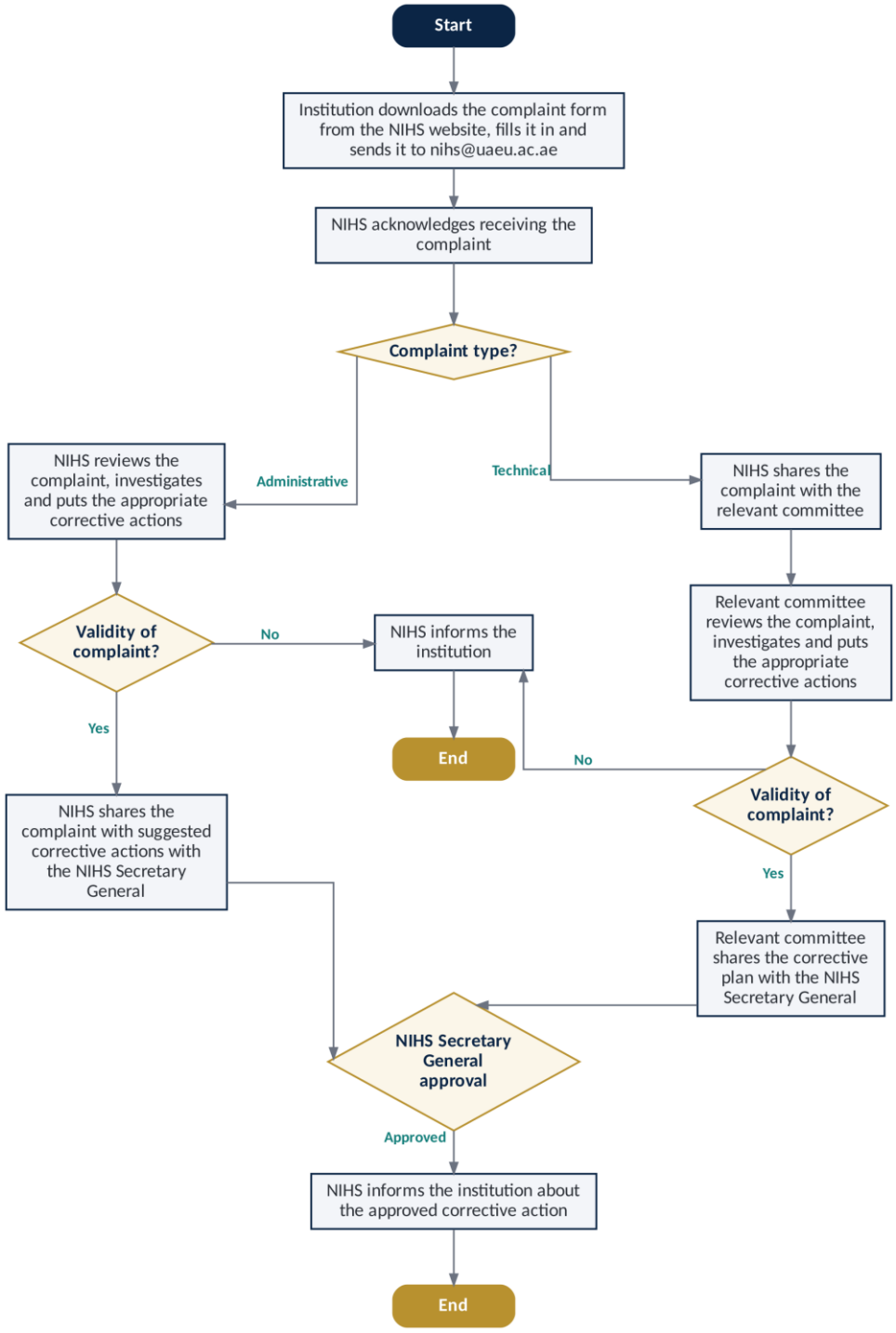
NIHS Training Capacity Modification form is available at the following link:
https://nihs.uaeu.ac.ae/en/accred_guide_forms.shtml

NIHS Appeal Procedure



NIHS Appeal form is available at the following link:
https://nihs.uaeu.ac.ae/en/accred_guide_forms.shtml

NIHS Complaints Procedure



NIHS Complaint form is available at the following link:
https://nihs.uaeu.ac.ae/en/accred_guide_forms.shtml

A2 Appendix 2: Forms

The forms below support the procedures in this manual. Completed forms are submitted to the NIHS Accreditation Unit with the supporting documents each form lists.

Accreditation Surveyors Registration Form
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Surveyor's Assessment Form
› Page 27

Conflict of Interest Disclosure Form
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Training Capacity Modification Form
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Appeal Form
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Complaints Form
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NATIONAL INSTITUTE FOR HEALTH SPECIALTIES

Accreditation Surveyors Registration Form

GENERAL INSTRUCTION

Before you begin completing your application

1. Gather the required information so that you can complete the application without interruption.
2. Have a copy of your CV ready in PDF (.pdf) format to upload. Maximum file size 1000 KB.
3. Have a current photo ready in GIF or JPG format (.gif, .jpg) to upload. Your photo size should be approximately 200 × 300 pixels. Maximum file size 500 KB.
4. All the information you enter here will be treated with high confidentiality.

GENERAL INFORMATION

1 Personal Information

Full Name	
Nationality	
Date of Birth	
Gender	
Mobile Number	
Email	
City	
Hospital Name	

2 Education

The field of specialty practice

General specialty		
Sub-specialty		
Years of experience (as a consultant or equivalent)		
Have you ever participated in accreditation evaluation visits?	☐ Yes	☐ No
Attending the Faculty Development workshop	☐ Yes	☐ No
Number of times participating in visits		

DOCUMENTS

Curriculum Vitae	☐ Attached
Practice License	☐ Attached
Recommendation letter from DIO (or relevant)	☐ Attached
Current photo in GIF or JPG format	☐ Attached
Statement letter explaining his or her interest	☐ Attached

SIGNATURE OF APPLICANT

Declaration by the Applicant

I hereby declare that the information I have provided in this application form and attached as supporting evidence is true. I understand that for this application to be successful, I must comply with the registration requirements set out by the National Institute for Health Specialties Accreditation Rules. I understand that my application may be refused or cancelled if I do not provide the necessary evidence or fail to provide true and correct information in this application.

If my application is accepted by NIHS, I commit to provide a minimum of five days per year for conducting accreditation site visits.

Name	
Signature	
Date	

NATIONAL INSTITUTE FOR HEALTH SPECIALTIES

Surveyor's Assessment Form

GENERAL INFORMATION		
1 Applicant's Portfolio		
Name		
Telephone No.		
Email		
Nationality		
Facility		
Emirate		
2 Qualifications/Experience		
Specialty	☐ Surgical	☐ Medical
Specify		
Years of experience in medical education		
Current clinical/academic position		
Participation in previous accreditation process	☐ Yes	☐ No
Specify		
NIHS STANDARD CRITERIA ITEMS/REQUIREMENTS		
Successful completion of accreditation courses	☐ Yes	☐ No
Committed to provide at least 5 days/year for accreditation site visits	☐ Yes	☐ No
DOCUMENTS		
Curriculum vitae submitted	☐ Yes	☐ No
Areas of strength		
Comments, if any		

Statement letter submitted	☐ Yes	☐ No
Recommendation/reference letter submitted	☐ Yes	☐ No
Comments, if any		
Scholarly activity participation		
OVERALL RATING		
☐ Agree	☐ Disagree	☐ Recommend for Interview
General Observations		

NAME	POSITION	SIGNATURE

NATIONAL INSTITUTE FOR HEALTH SPECIALTIES

Conflict of Interest Disclosure Form

GENERAL INSTRUCTION

Before you begin

1. You must read the NIHS Conflict of Interest Policy.
2. Submit the signed form to the NIHS Accreditation Unit.

NIHS CONFLICT OF INTEREST POLICY FOR REGISTERED ACCREDITATION SURVEYORS

Terms and conditions

- Accreditation surveyors registered by NIHS are not allowed to participate in work or activity that competes with the NIHS role in the UAE.
- Accreditation surveyors registered by NIHS are not allowed to undertake any private or direct transactions with NIHS clients related to the institutional and program accreditation process without prior approval from NIHS.
- Accreditation surveyors registered by NIHS must refrain from disclosing information related to the assessment results to the concerned entities.
- Accreditation surveyors registered by NIHS must refrain from disclosing any public or private information related to any transaction that takes place through NIHS, or using any of that information to achieve personal gain or interests.
- Accreditation surveyors registered by NIHS should not evaluate the entity in which they work. In addition, they should inform NIHS in advance of any conflict of interest (board membership, advisory role, etc.) with any party for which NIHS wishes to conduct an evaluation.
- Accreditation surveyors registered by NIHS must refrain from accepting gifts from parties dealing with NIHS that would lead to wasting or harming NIHS's interests.
- Accreditation surveyors registered by NIHS must declare any form of conflict of interest that relates to a family member (financial or not) in relation to instances of work undertaken.

SIGNATURE OF APPLICANT

Declaration by the Accreditation Surveyor

I acknowledge that I have read and understood the National Institute for Health Specialties' conflict of interest policy. Accordingly, I agree to, abide by and acknowledge all terms mentioned in this policy.

Name	
Position	
Signature	
Date	

NATIONAL INSTITUTE FOR HEALTH SPECIALTIES

Training Capacity Modification Form

1. GENERAL INFORMATION		
A. Program and Sponsoring Institution Information		
Name of Program		
Name of Sponsoring Institution		
Start date		
Training years		
Number of resident positions		
Type of program	☐ Residency	☐ Fellowship
B. Key Contacts		
Program Director		
Title		
Full Name		
Position		
Telephone		
Email		
2. TRAINING CAPACITY MODIFICATION		
Type of modification	☐ A. Increment	☐ B. Decrement
C. Current Training Capacity		
Total No. of Residents	No. of Residency Training Years	No. of Residents per Year
D. Requested Training Capacity		
Total No. of Residents	No. of Residency Training Years	No. of Residents per Year
E. Justification for the changes in training capacity		

What is the justification for modifying the training capacity?

3. CLINICAL SERVICE INFORMATION								
Institution	**Specialty Department**	**Number of general physicians**	**Number of specialist physicians**	**Number of consultant physicians**	**Number of beds**	**Number of inpatient admissions/ month**	**Number of outpatient visits/ month**	**Description / Additional Information**
Institution #1								
Institution #2								
Institution #3								

4. SUPPORTING DOCUMENTS
List and attach all supporting documents for the application.

5. SIGNATURE OF PROGRAM DIRECTOR AND DIO	
To be completed by the Program Director and DIO of the entity applying for the Training Capacity Modification Request.	
Program Director Signature	
Date	
DIO Signature	
Date	

NATIONAL INSTITUTE FOR HEALTH SPECIALTIES

Appeal Form

1. GENERAL INFORMATION	
1 Institution Information	
Entity name	
Telephone	
Email	
Specialty program title	
2 Key Contacts	
Designated Institutional Official	
Title	
Full Name	
Position	
Telephone	
Email	
2. APPEAL DETAILS	
Reasons for the appeal:	
3. EVIDENCE TO SUPPORT YOUR APPEAL REQUEST	
List all documents supporting the appeal request and attach them to the application.	
4. SIGNATURE OF DIO	
To be completed by the Designated Institutional Official of the entity applying for the Appeal Request.	
DIO Signature	
Date	

NATIONAL INSTITUTE FOR HEALTH SPECIALTIES

Complaints Form

1. GENERAL INFORMATION	
1 Institution Information	
Entity name	
Telephone	
Email	
Specialty program title	
2 Key Contacts	
Designated Institutional Official	
Title	
Full Name	
Position	
Telephone	
Email	
2. COMPLAINT DETAILS	
Date and time of incident	
Location of incident	
Describe the incident in detail	
Do you have any suggestions for resolving the complaint? If so, please explain.	
Do you have any additional information or complaints? If so, please explain.	
3. EVIDENCE TO SUPPORT YOUR COMPLAINT REQUEST	
List all the documents that support the complaint and attach them to the request.	

4. SIGNATURE OF DIO	
To be completed by the Designated Institutional Official of the entity applying for the Complaint Request.	
DIO Signature	
Date	