



american **midwifery** certification board

Discipline Complaint Form

If you wish to file a complaint against a midwife, please complete the form and submit it to the Discipline Director, Denise Smith at dsmith@amcbmidwife.org.

Date

Email Address

First Name

Last Name

Street Address

Street Address

City

State

Zip Code

.....
First Name of Midwife

Last Name of Midwife

Certification Number

Credential

Date of Incident

Location of Incident

Please describe the incident with as much detail as possible.

[Incident details continued...](#)