

Proudly Training a Safe and Skilled HEO Workforce since 2005.

HARASSMENT COMPLAINT FORM - CONFIDENTIAL

	omplainant Name:					
Job Title: Work Location: Telephone: Name and department of alleged Harasser (s)						
			Pe	Personal Statement		
				Please describe the nature of your complaint by providing a detailed description of what happened. This description should include:		
				a) names of those involved		
	b) dates and times of incident(s)					
	c) names of witnessesd) any prior attempts to resolve the situ	uation				
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Sig	gnature:	Date:				
	To be completed by Human Resources and					
	Date Received:	Name of Investigator:				
	Date Resolved:	Supporting documentation attached? Y or N				