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| Document Name | Harassment Complaint Form |
| Document Number | H7022f |
| Last revised | October 3, 2022 |
| Purpose | A reporting form employers can utilize to capture details of an incident including corrective and preventative actions. |
| Connecting Documents | Not applicable |
| Connecting Forms | H7021f, H7023f, H7024f |
| Connecting Systems | Not applicable |

Harassment Complaint Form

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| Name of Complainant: | | |
| Person suspected of harassment (respondent): | | |
| Nature of the allegations. | | |
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| Incident (include date and times). | | |
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| Did anyone witness the incident? | | |
| If YES | Name of witness: | |
| Description of their respective role in the incident: | | |
| How did you (complainant) react to the harassment? | | |

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| If applicable, describe any incident that took place previously: | |
| Are you concerned for your safety while working with the respondent? | |
| What do you feel would be the most appropriate resolution? | |

The information on this form will only be disclosed to those required to know for the purposes of an investigation.

To maintain confidentiality and ensure a fair investigation is conducted, employees filing a complaint are asked to refrain from discussing their complaint with those not directly involved in the investigation.

Acknowledgement

I hereby certify that to the best of my knowledge the abovementioned information is true, accurate and complete. I understand that making false or frivolous allegations is in violation of EZ STAK's (insert name of policy) policy and in doing so I understand I may be subject to disciplinary action up to and including termination of employment.

Signature of the complainant

Date