



**WORKPLACE HARASSMENT COMPLAINT FORM**

**COMPLAINANT INFORMATION**

*Discrimination and/or harassment was directed towards*

Name of Complainant:

Title/Position: Worksite:

Additional Information:

Supervisor/Manager's Name:

Supervisor Title/Position: Supervisor Work Phone:

**RESPONDENT INFORMATION**

*Discrimination and/or harassment was directed by*

Name of Respondent:

Title/Position: Worksite:

**INITIATOR INFORMATION**

*Complete this section only if the employee who initially identified the offensive behaviour is different from the complainant*

Name of Person Making the Report (if different from above):

Title/Position:

Worksite:

**PRE-STEP**

Was the respondent advised that the behaviour was unwelcome?  Yes  No

Date Complainant advised Respondent that the behaviour was unwelcome:

**COMPLAINT**

Describe the alleged discrimination/harassment. Set out all facts, in chronological order, on which the complaint is based. Include dates, times, locations, the identity of witnesses, and a description of the steps already taken to resolve the matter. Attach additional pages if necessary.

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