

Concerns/Complaints/Reports About Employees

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Concerns/Complaints/Reports About Employees

COMPLAINT ABOUT EMPLOYEE

Report Form

Name of person making complaint: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Work site, if applicable: \_\_\_\_\_

Person about whom the complaint is expressed: \_\_\_\_\_

Nature of the complaint and evidence/examples used to support the complaint (attach additional information, if possible): \_\_\_\_\_

\_\_\_\_\_

Person to whom the complaint was referred: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of complainant: \_\_\_\_\_

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(to be completed by person receiving the complaint)

Name of person receiving the complaint: \_\_\_\_\_

Date and time complaint was received: \_\_\_\_\_

Supervisor's decision: \_\_\_\_\_

\_\_\_\_\_

Administrative investigation set: \_\_\_\_\_ (or) Dismiss:

Explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Complaints, whether resolved or dismissed, must be filed in the personnel office with a copy of the Complaint Resolution Form.