

Regulation Procedure

Harassment Complaint Form

Name of Person Filing Complaint: _____

Position of Person Filing Complaint: _____

Date of Complaint: _____

Name of Alleged Harasser: _____

Date and Place of Incident of Incidents: _____

Description of Misconduct (use additional pages if necessary): _____

Name of Witnesses: _____

Evidence of Harassment, i.e., letters, photos: _____

Any other Information: _____

I agree that all the information on this form is accurate and true to the best of my knowledge.

Signature: _____

Date: _____