

Employee Harassment Complaint Form Template



Employee Harassment Complaint Form

Personal Details of Complainant:

Full Name: _____
Employee ID: _____
Position/Title: _____
Department: _____
Contact Number: _____
Email Address: _____

Details of the Accused (if known):

Full Name: _____
Employee ID: _____
Position/Title: _____
Department: _____

Incident Details:

Date of Incident: ____/____/____
Time of Incident: ____:____
Location of Incident: _____

Witnesses (if any):

1. _____
2. _____

(Add more if needed)

Nature of Harassment (Please check the relevant box):

- Verbal
 Physical
 Visual (e.g., pictures, gestures)
 Cyberbullying or online harassment
 Other: _____

Detailed Description of the Incident:

(Please provide a thorough description of what happened. Attach additional sheets if necessary)

Supporting Evidence:

(Please list any supporting evidence you might have, e.g., emails, text messages, photos. Attach copies if possible, but ensure originals are kept safe.)

1. _____

2. _____

(Add more if needed)

Actions Desired:

(What would you like to see happen in response to this complaint? This can be kept blank if you're unsure.)

Declaration:

I, _____ (Full name of the complainant), declare that the information provided in this form is true and accurate to the best of my knowledge. I understand that providing false information can have serious consequences.

Signature: _____ Date: ____/____/____

For Office Use Only

Received By: _____

Date: ____/____/____

Initial Actions Taken:

Ensuring that every harassment complaint is treated with seriousness, confidentiality, and sensitivity is crucial for an organization's integrity and the well-being of its employees.