



Confidential Monitoring Form
Bullying & Harassment

This form should be completed when a formal complaint is made or by a Manager raising formal action without a complainant.

Name: _____	Tel: _____
Line Manager: _____	Department: _____

Name(s) of alleged harasser(s): _____
Date or Period of incident(s) : _____

Please give an outline of the incident(s) (continue on a separate sheet if necessary)

Name(s) any witnesses to the behaviour complained of: _____

Have you discussed this matter with anyone (line manager, union rep, alleged harasser) _____
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Please outline any informal action taken

Please state how you would like the issue resolved

Signed: _____ Date: _____

Person receiving form: _____

Signed: _____ Date: _____

Please hand this completed form to your line manager and ensure a copy is sent promptly to the HR Service.