

Confidential Monitoring Form Bullying & Harassment

This form should be completed when an informal or formal complaint is made or by an employee or manager raising informal or formal action.

| Name: | Tel: |
|---------------------------------------|-------------|
| Line Manager: | Department: |
| Name(s) of alleged harasser(s): | |
| Date or Period of incident(s) : | |

| Please give an outline c | f the incident(s) (continue or | a separate sheet if necessary) |
|--------------------------|--------------------------------|---------------------------------------|
| 5 | | · · · · · · · · · · · · · · · · · · · |

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

Have you discussed this matter with anyone (line manager, union rep, alleged harasser)



| 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.