

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)
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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.