



WORKPLACE BULLYING AND HARASSMENT COMPLAINT FORM

PLEASE PRINT LEGIBLY-- ALL INFORMATION ON FORM

First Name: _____ Last Name: _____

Phone: _____ E-mail: _____

Address: _____

Postal Code: _____

Attach any supporting documents, such as emails, handwritten notes or photographs. Physical evidence such as vandalized personal belongings can also be submitted.

Describe in as much detail as possible the bullying and harassment incident(s) and use additional lined paper if not sufficient room provided.

Name of alleged bully or bullies: _____

Names of witnesses: _____

Location, date and time of incident(s): _____

Details about the incident(s) such as behavior and/or words used: _____

