



ANNEX B

Workplace Complaint and Investigation Form

Note:

This form may be used for filing a complaint and provides guidance to the Committee in investigating inappropriate incidents or complaints. The person(s) conducting the investigation must not have been involved in the incident or complaint and must not be under the direct control of the alleged offender.

A. Background Information:

1. Name of person who experienced the incident or complaint:
2. Date incident or complaint occurred:
3. Name of respondent (i.e. alleged offender); Position/ Department:

If not a Catalyste+ representative, provide details:

B. Workplace Incident Allegations (Attach more pages if necessary): When did the incident(s) occur? Confirm date of first incident and any subsequent behaviours or conduct. *(If more than one event, please report each event on a separate form.)*

Date of first incident:

Date of last incident:

Date of other incident(s):



Where did the specific event occur?

Please explain the events that occurred:

Were there any witnesses to this specific event? (If yes, please provide their names) How did you feel?

What would be your desired outcome as a result of an investigation?