

Section:	<b>Human Resources</b>
Policy:	<b>4.25</b>
Revised:	<b>May 2023</b>
Approval:	

## 4.25 Bullying and Harassment Complaint Form

Name of complainant		
Name of respondent/alleged bully		
Date	Location	
Name of investigator(s)		
Person interviewed	Other people involved (e.g., alleged bully, witnesses)	Description of the situation (dates, words, actions, etc.) and impact (e.g., humiliated, intimidated)
Based on the investigation, did workplace bullying and harassment occur? Yes No		
Reason(s) for this conclusion		