

**COMPLAINT/INCIDENT REPORT**

**Date Complaint Received:**

**Details of the Complainant**

Name of complainant	Title	Department
Direct Manager	Phone	Email

**Details of the Incident**

Name(s) of alleged perpetrator	Title, department, location (if internal) or Company details (if external)
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Summary of all issues, concerns or complaints

Timeline – Chronological detailed account of the alleged issues with dates, times, places and first-hand witnesses to the events

**Details of the Evidence or Supporting Documentation**

List of all documentation and physical evidence to support the allegations being made. Examples:

- Notes or log of events the complainant has made
- Performance reviews
- Corrective action documentation
- Safety incident documentation
- Medical documentation
- Any other documentation the complainant deems appropriate

**Details of the Witnesses**

List of people the complainant suggests may have relevant information to the allegation and whether the information is first-hand or hearsay

Signature:

Date: