

REPORT OF HARASSMENT-EMPLOYEE

Name of Complainant: _____

For Employees, Position and Location: _____

Address: _____

Phone Number: _____

Email Address: _____

Date(s) of Alleged Incident(s) of Harassment: _____

Name of person(s) you believe harassed you or others: _____

If the alleged harassment was toward another, please identify that person: _____

Please describe in detail the incident(s) of alleged harassment, including where and when the incident(s) occurred. Please note any witnesses that may have observed the incident(s). Please include a description of any past incidents that may be related to this complaint. Attach additional pages if necessary.

I certify that the information provided in this report is true, correct and complete to the best of my knowledge:

Signature of Complainant

Date

Complaint Received By: _____

Executive Director or Compliance Officer

Date

Date Adopted: April 18, 2013, Reviewed September 18, 2025