



Policy Supporting Document:	O-5.10.2
Amended:	September 28, 2016
Policy Holder:	Exec. Dir. Human Resources

RESPECTFUL WORKPLACE FORMAL COMPLAINT FORM

You have decided to initiate a formal complaint under the Respectful Workplace Policy. The following information is required in order to help in the resolution of your complaint. Once the form has been filled out, please make sure you sign and date it and then submit it to your workplace leader or the Executive Director of Human Resources.

Prior to filling out this Complaint Form, please review the [Respectful Workplace Policy](#) and the [Procedures for Reporting, Resolving and/or Investigating Respectful Workplace and Human Rights Complaints](#) on Camosun College's Policy website.

In answering any of the questions below, you may use additional paper if necessary and attach it to this form.

- A. Complainant's Name:
Address: _____ Phone: _____
Department/Program: _____ Campus: _____
- B. Who is the complaint filed against? (Respondent's) Name: _____
Department/Program: _____ Campus: _____
Respondent's relationship to you through Camosun: _____
- C. Is this complaint about discrimination or harassment because of a protected ground covered by the BC Human Rights Code, specifically: race, colour, ancestry, place of origin, religion, age, marital status, family status, physical or mental disability, sex, sexual orientation, political belief or criminal or summary offence unrelated to employment?
Yes No

SUBSTANCE OF COMPLAINT

A. Where did the incident related to your complaint happen?

B. Please describe the incident(s) leading to your complaint. It is important to include date(s) and time(s) of the incident(s). What happened? Detail the fact and history of the conduct.

C. Please list witnesses to the incident(s) if available.

D. If your complaint is about a protected ground covered by the [Human Rights Code](#), please state which protected ground and why you believe you were harassed or discriminated against. Continue your complaint on the next page.

RESOLUTION

A. Describe what steps you have taken to try to resolve this issue and/or any help/advice you have received regarding this issue prior to filing this complaint

B. What do you require to resolve this complaint?

By signing this complaint form, I hereby authorize Camosun College to engage in resolution of my complaint, including but not limited to, conducting an investigation into my complaint as described in this complaint form and attachments. I also hereby authorize Camosun College to disclose this Complaint Form to the Respondent, unless it jeopardizes my personal safety to do so.

I understand that all information regarding a complaint is to be treated in confidence and that I will only disclose this information on a "need to know" basis. I further understand that any allegation or complaint of discrimination, harassment or sexual harassment will be considered personal information "supplied in confidence" for the purpose of Section 22(2) of the Freedom of Information and *Protection of Privacy Act*. I also understand that my name or the circumstances of the complaint will not be disclosed to any person except where disclosure is necessary for the purpose of engaging in resolution of the complaint. I understand that disclosure of my name and the Complaint Form to the Respondent is necessary for the purpose of engaging in resolution of the complaint. The substance of investigative reports and the substance of meetings held by those in authority to make a decision about resolution of the complaint, regardless of whether it is substantiated, will be protected from disclosure to third parties in accordance with Section 22(2)(f) and Section 22(2)(h) of the *Act*.

Signature of complainant: _____ Date: _____