

# Employee Grievance Form: Workplace Harassment

This **employee grievance form** sample is designed to help staff formally report workplace harassment concerns, ensuring a clear and structured process. It promotes a safe and respectful work environment by documenting incidents accurately. Utilizing this form supports timely resolution and compliance with company policies.

## Employee Information

**Full Name**

**Job Title/Position**

**Department**

**Contact Information (email/phone)**

## Details of the Grievance

**Type of Harassment**

**Date(s) of Incident(s)**

**Location of Incident(s)**

**Person(s) Involved**

**Detailed Description of the Incident(s)**

**Witnesses (if any)**

## Actions Taken

**Have you taken any actions regarding this incident? (e.g., spoke to the person, informed supervisor)**

## Resolution Sought

**What outcome or support are you seeking?**

## Signature

**Employee Signature**

Type your name here

**Date Submitted**

*Please submit this form to your supervisor, HR department, or designated grievance officer. All complaints will be handled with confidentiality and in accordance with company policy.*

**Submit Grievance**