

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

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.