

## ANNEX 2 – BULLYING & HARASSMENT FORMAL INDIVIDUAL COMPLAINT FORM

Where possible, a complaint of bullying and harassment should be resolved using either the initial stages at Section 5 of the procedure, or the informal stage at Section 6 of the procedure. Where these approaches fail, or if the matter is deemed to be too serious to be dealt with informally, the formal stage should be invoked (section 7 of the procedure).

This form must be submitted in all cases of a formal complaint of bullying and harassment being lodged and must be completed in full or the complaint will not be investigated. **However, it should be noted that where a bullying and harassment complaint is raised during the formal stages of a different procedure, and the complaint relates to matters already under consideration as part of that procedure, the complaint will be dealt with as part of that procedure.** Only where the bullying and harassment complaint is deemed not to be related to the matters being considered under a different procedure, will the provisions of this procedure apply.

For help in completing the form, advice may be sought from a representative of your trade union.

The form should be completed and returned to either the Headteacher or, if the complaint relates to the Headteacher, the Clerk to Governors who will forward it to the Chair of Governors. A completed copy of the form must always be forwarded to the Head of Schools HR by the Headteacher or the Clerk to Governors.

A copy of Section B of the form, together with any additional sheets submitted under Section B, will be sent to the person against whom the complaint is being made (i.e. the respondent). **A separate Section B therefore needs to be completed for each respondent.**

### SECTION A – PERSONAL DETAILS

(Other than name, this information is confidential and **not to be shared with the respondent.** **Therefore the form should not be copied/printed double-sided**)

1.	Surname _____ Forename _____ Home or work address (for communication purposes) _____ _____ Home telephone No (_____) _____ Work telephone No (_____) _____ Job Title _____
2.	Are you being represented by a trade union in this matter? YES/NO If so, please give details _____
3.	Please provide your signature and the date you submitted this form, in order that the time limits outlined within the procedure can be followed. Signed _____ Date _____

**SECTION B – COMPLAINT DETAILS**

(a copy of this will be provided to the respondent – please provide a separate Section B for each respondent)

4.	<p>Please give the name of the employee against whom the complaint is being made and, exactly as possible, the place, time and date of the incident (s) that you are complaining about.</p> <p>My complaint is against _____(name)</p> <p>Incident(s) details    Date _____</p> <p style="padding-left: 100px;">Place _____</p> <p style="padding-left: 100px;">Time _____</p> <p style="text-align: center;"><i>(Please continue on a separate sheet if necessary)</i></p>		
5.	<p>Please attempt to indicate the heading(s) under which your complaint falls.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;"> <input type="checkbox"/> Bullying  <input type="checkbox"/> Victimisation  <input type="checkbox"/> Disability *Harassment/Discrimination  <input type="checkbox"/> Racial *Harassment/Discrimination  <input type="checkbox"/> Sexual *Harassment/Discrimination                 </td> <td style="width: 50%; vertical-align: top; padding: 5px;"> <input type="checkbox"/> Sexual orientation *Harassment/Discrimination  <input type="checkbox"/> Age *Harassment/Discrimination  <input type="checkbox"/> Religion or belief  <input type="checkbox"/> Trade union activity  <input type="checkbox"/> Other (please state) _____                 </td> </tr> </table> <p>*please delete as necessary</p>	<input type="checkbox"/> Bullying <input type="checkbox"/> Victimisation <input type="checkbox"/> Disability *Harassment/Discrimination <input type="checkbox"/> Racial *Harassment/Discrimination <input type="checkbox"/> Sexual *Harassment/Discrimination	<input type="checkbox"/> Sexual orientation *Harassment/Discrimination <input type="checkbox"/> Age *Harassment/Discrimination <input type="checkbox"/> Religion or belief <input type="checkbox"/> Trade union activity <input type="checkbox"/> Other (please state) _____
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6.	<p>Please provide the names, addresses and telephone numbers of any witnesses to any of the incidents that have agreed to provide information if required</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top; padding: 5px;">                 Name _____                  Address _____                  _____                  Telephone No (_____) _____                  Which incident(s) has been witnessed by this person?                  _____                  Have you obtained this person's consent to include their details on this form?  <div style="text-align: right;">YES/NO</div> </td> <td style="width: 50%; vertical-align: top; padding: 5px;">                 Name _____                  Address _____                  _____                  Telephone No (_____) _____                  Which incident(s) has been witnessed by this person?                  _____                  Have you obtained this person's consent to include their details on this form?  <div style="text-align: right;">YES/NO</div> </td> </tr> </table> <p style="text-align: center;"><i>(Please continue on a separate sheet if necessary)</i></p>	Name _____ Address _____ _____ Telephone No (_____) _____ Which incident(s) has been witnessed by this person? _____ Have you obtained this person's consent to include their details on this form? <div style="text-align: right;">YES/NO</div>	Name _____ Address _____ _____ Telephone No (_____) _____ Which incident(s) has been witnessed by this person? _____ Have you obtained this person's consent to include their details on this form? <div style="text-align: right;">YES/NO</div>
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7. Please describe the circumstances that make you believe that you have been harassed or bullied? Describe as fully as you can what took place, giving relevant and important dates, times, names of persons involved and, where applicable, their official positions. Please note that as part of the investigation, you will be interviewed to obtain further information and detail about the incidents outlined on this form. Therefore you must clearly outline the matters that you wish to be considered as part of the investigation process on this form.

*(Please continue on a separate sheet if necessary)*

8.	<p>It is expected that the majority of bullying and harassment complaints will be resolved without recourse to the formal stages of the procedure. Therefore complainants are strongly encouraged to have their complaint considered at the informal stage, as this can often result in a quicker and more constructive outcome than the formal stage.</p> <p>Please outline details of any action that has taken place to try and stop the unwanted behaviour either outside of this procedure, or at the informal stages? Please including details of any meetings that have been held, or any other parties involved in this informal approach.</p> <hr/> <hr/> <hr/> <hr/> <p>If you have felt unable to take action under the initial or informal stages of the procedure, can anything be done to assist you in dealing with the complaint at the informal stage?</p> <hr/> <hr/> <hr/> <hr/>
9.	<p>What would be your preferred outcome from this complaint? <i>(Please bear in mind that this may not necessarily be achievable)</i></p> <hr/> <hr/>

*This form will be acknowledged, in writing, within 5 working days of receipt of the form by the Headteacher or Clerk to Governors. Following this, you will be contacted by the investigating officer to arrange a convenient time to be interviewed about this complaint.*

Date of receipt of complaint: .....

Details of the person receiving the complaint:

.....  
NAME SIGNED