

# Sexual harassment reporting

Use this form to report sexual harassment. It can be used by someone experiencing or seeing sexual harassment.

- If you need to, get someone you trust to help you fill it in.
- Give the completed form to: (insert name of the relevant person in the organisation)

*This report will be treated confidentially. It will only be provided to the subject(s) of the complaint, support persons (including representatives) and those involved in investigating and considering it.*

Name:

Position within the organisation:

When did the incident(s) happen: (date and time)

Provide details of the incident, for example:

- Where did it occur?
- Who was present?
- What was said or done? Who by? What's their position?
- Who witnessed this incident?
- How did this incident make you feel?
- How has this incident affected you?
- Have you taken any actions? If so, what?
- What would you like to happen next?

- I understand that I can seek help to complete this form.
- I understand that the information provided in this report will be disclosed to the parties involved.
- I declare to the best of my knowledge the information provided in this form is true and correct.

Name:

Date: DD / MM / YEAR