



ACC13 HARASSMENT INCIDENT REPORT FORM

Privacy Statement: *The ACL will keep all information relating to an incident or complaint confidential. However, to investigate an incident or complaint, the Applicable Authority, National Executive Committee or other internal or external investigator(s) conducting the investigation may have to interview people to obtain evidence and determine the facts. As far as possible in doing these interviews, they will try to protect the identity of those involved, but this will not always be possible. The person conducting the investigation will advise those being interviewed that the matter is not to be discussed with anyone other than the person conducting the investigation.*

The ACL will only disclose information on a need-to-know basis. The documents corresponding to any investigation will be kept on file in a secure location, for as long as necessary. Records of any remedial action taken will be placed in the members or affiliates file.

To be completed by the Complainant.

Please do not delay submitting this report to the Applicable Authority (see [Harassment Policy](#)) even if you cannot fully answer all the questions. Additional information can be provided subsequently.

This is a fillable PDF. If completing manually, please print and use **black** or **blue** ink. Insert additional pages as necessary.

Name and Title: _____

Date: _____

Address: _____

Email Address: _____

Telephone: _____

Did the incident involve an employee, member or affiliate of the ACL? YES NO

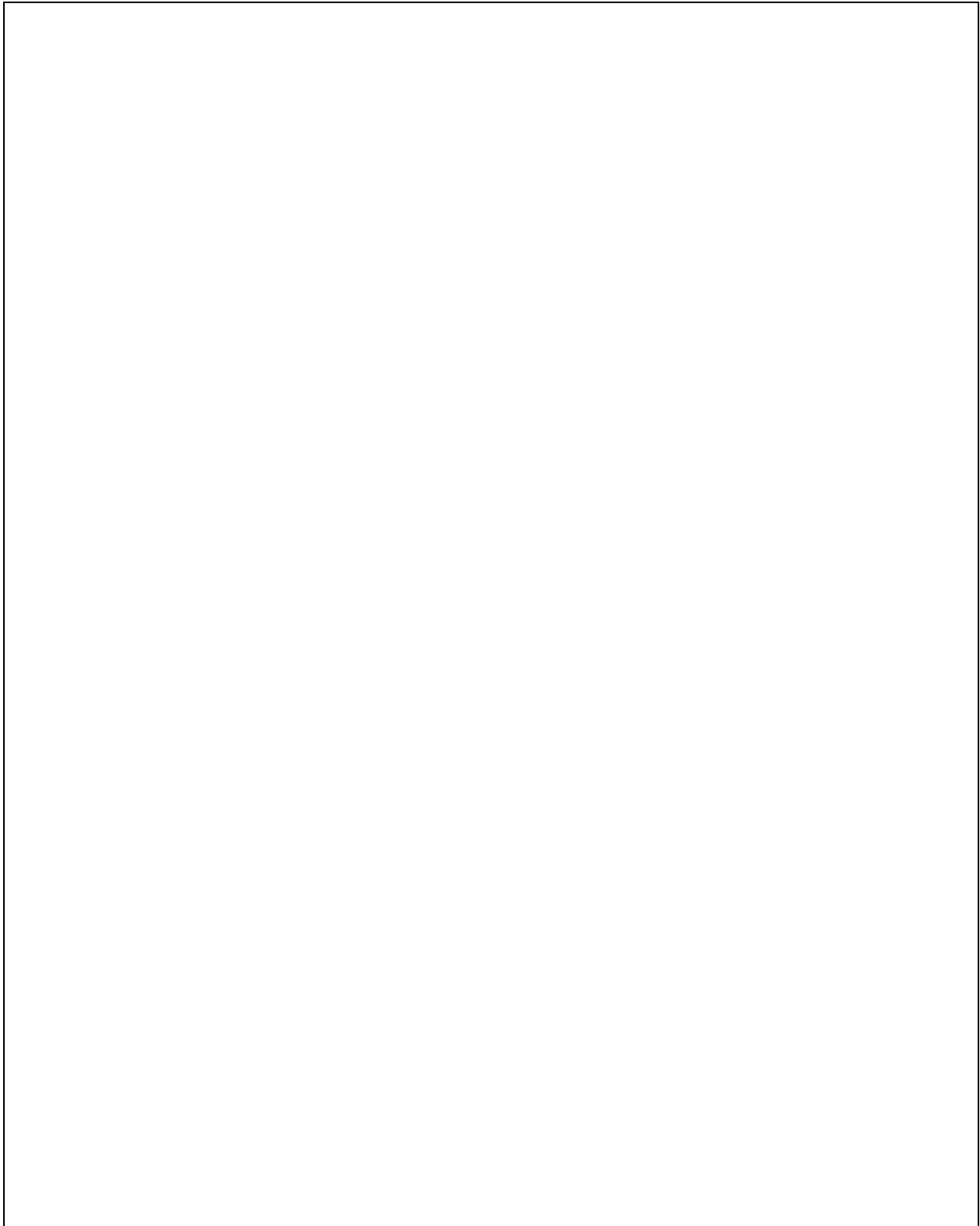
If so, name and title of the other employee, member or affiliate: _____

Did the incident involve any other person? YES NO

If so, identify this person: _____

Describe incident of Harassment (include date, time and location):

Identify witnesses to the incident (include names, addresses and telephone numbers if available):

A large, empty rectangular box with a thin black border, intended for recording witness information. The box is currently blank.

Other information which may be helpful to an investigation (please use additional paper if necessary:

Print Name: _____

Date: _____

Signature: _____