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**Employee’s Formal Complaint / Incident Report**

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| **Name and role of person completing this form:** |
| **Signature of person completing this form:** |
| **Date:** |

**Incident**

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| **Date and time of incident:** |
| **Name/s of person/s involved in the incident and their clubs/associations:** |
| **Description of complaint / incident:** |

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| **Witnesses (include contact details):** |

**Reporting of the incident to club/association**

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| **Incident Reported to:** | **Date:** |
| **How (in person or email):** | |

**Follow Up Action (To be completed by board)**

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| **Description of actions to be taken:** |