

APPENDIX 2. Complaint Report Form

Please use this Form to make a Formal Complaint regarding discrimination or abuse of any kind towards yourself or another person, including a child. **Please read the Code of Conduct Document before using this form.**

COMPLAINT FORM (Private and Confidential) Date: / /202__ Time: __:__ am/pm

Your Name: _____	(If applicable) Role at the College: _____
Is the complaint about offending behaviour: a. Directed towards you? Yes / No b. Concerning a child? Yes / No c. About a vulnerable person? Yes / No	Who was the victim of the behaviour? Name: _____ Date of Birth: ___ / ___ / _____ Age: ___ Address: _____
Please briefly, but accurately, describe the alleged behaviour about which you are lodging this Complaint Report Form. (Keep to the facts, without interpretation or opinion.) Who was the offending person? _____ What abusive behaviour did you observe or come to hear about? _____ _____ _____ Is the abuse still happening or was <u>it</u> a past event? _____ Is there any physical evidence of abuse – is the child injured? _____ _____ Where did the event/behaviour take place? _____ _____ Were there other witnesses? If so, provide name(s) _____ _____ What is the level of risk to the victim now? (Low – High; Immediate – possible) _____	