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| --- | --- | --- | --- | --- | --- |
| **HR Employee Complaint** | | | | | |
| Complainant name | | |  | | |
| Phone | | |  | | |
| Department | | |  | | |
| Job title | | |  | | |
| Address | | | | | |
|  | | | | | |
| Supervisor name | |  | | | |
| Phone | |  | | | |
| ***In case of representation:*** | | | | | |
| Representative name | |  | | | |
| Phone | |  | | | |
| Organization | |  | | | |
| Address | | | | | |
|  | | | | | |
| ***Complaint Guidelines:***  A complaint is defined as:  1) A claim by an employee about a specific management act which is charged to have adversely affected the existing terms or conditions of employment.  2) A claim by an employee (adversely affected by an action by the management) charging that a provision of Personnel Policies for Staff Members has been violated. | | | | | |
| Describe your complaint in detail as per the following five points. Attach additional documents if required.   * Management act to be reviewed. * Date or dates of each act. * University policy or procedure violated (if any). * How did the management act violate policy or procedure? * Were you adversely affected? | | | | | |
| Resolution Requested: | | | | | |
|  | | | | | |
| Complainant signature |  | | | Date |  |
| Representative signature |  | | | Date |  |