



Formal Grievance Form

Date: _____ Reference Number: _____ [year/number e.g.2015/1]

Family Name: _____ Other Names: _____ Designation: _____

Phone: _____ Email: _____

Address: _____

Please tick which type of grievance applies:

Operations

Administration

Sexual Harassment

Racial or Sexual Discrimination and Harassment

Physical Abuse

Verbal Abuse

Other – Please explain. _____

Date of the incident [dd/mm/yyyy] Include date range where relevant. _____

Please name the people involved in the incident

Where did the incident occur?

The details of the grievance are as follows:

please attach sheets if more space is required]



I would like the following actions to be undertaken:-

I have attempted to resolve this grievance informally as listed below:-

Date of discussion	Person I spoke with	Discussion notes/outcome

If you have documentation to support your case, please submit them along with this form.

Declaration.

I declare that the information given on this form is true and correct

Signed _____ Date _____

This form must be completed and forwarded to The President of POWERtalk Australia Inc.





[for office use]

Form received by:

Family Name: _____ Other Names: _____

Designation: _____

Phone: _____ Email: _____

Address: _____

Date of receipt of form: _____ Time of Receipt _____

Contact made with complainant:

Type: _____

Date: _____ Time _____

Appointment made for:

Date: _____ Time _____

Other people to attend:

Other action taken:

Signature _____

[proceed to resolution form]