

[Name of House]

Discrimination, Harassment or Bullying Formal Notification Form

USING THIS FORM

You need to complete this Notification Form and provide it to the House Grievance Officer if you want a formal procedure to deal with your concerns about discrimination, harassment or bullying. Advice on filling in the Form is available. Discuss this with the House Grievance Officer first if you like.

The House Grievance Officer will check the Form and clarify any details with you, including revising the Form if you require and/or agree to the revision. Once it is finalised and signed, a copy of the Notification Form will be given to the other people identified below as being involved in the discrimination, harassment or bullying. Everyone involved must be provided with a copy of the Anti-Discrimination, Harassment and Bullying Information Handbook at the same time as they are provided with the Notification Form.

Other than the people involved, and the Grievance Officer, the Notification Form must be kept in confidence.

DETAILS Your Name:		
		Address:
Phone Number:	Mobile Number:	
Email:		
Please provide a brief description of the discrimination, harassment or bullying that concerns you, including descriptions of behaviour, where the behaviour occurred, and dates that the behaviour occurred. This information will help identify the best way to deal with your concerns. Add more pages if you need them.		



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Name(s) of person(s) or group responsible for the alleged discrimination, harassment or bullying		
Their contact details		
What steps have you already taken to try to resolve your concerns with the other person(s) or group?		
Is your concern already being dealt with or has it been dealt with elsewhere? If so, please describe briefly.		
Do you have any special needs that require consideration? For example, wheel chair access, interpreter, child care (indicate times), visual/hearing disability, help to put things in writing etc.		
cure (marcure times), visual/neuring aisaonity, neip to put timigs in writing etc.		
Signed:	Dated:	
Received by:		
Signed:	Dated:	