

## INCIDENT REPORT

Date and time report is received: \_\_\_\_\_

Complainant (Assigned Alias)	
<i>Actual name of complainant is indicated in the last page of this report. If complainant did not request anonymity, the employee's actual name shall appear above.</i>	
Where did the incident take place?	
Company ID number:	<b><u>Refer to last page</u></b>
Immediate Supervisor:	<b><u>Refer to last page</u></b>

I.	Date the incident happened:	
II.	Where did the incident take place?	
III.	Details of the incident (What happened?)	
IV.	What Code of Conduct Policy is violated?	
V.	Have you reported this to your immediate supervisor yet?	
VI.	What action did your immediate supervisor do about it?	
VII.	Do you have proof / evidence to support the report?	
VIII.	Are there other people who can attest as witnesses to the incident?	
IX.	Names of witnesses	

X.	Other details	
XI.	Documents, Files, Photos, etc. submitted	
XII.	Submit anonymously?	
XIII.	Do not CC immediate supervisor?	
XIV.	Reason for excluding immediate supervisor:	

## SIGNATURES AND ACKNOWLEDGMENTS

By signing below, I certify that I have submitted the report by my own free will and that the details I have provided above are true and correct to the best of my knowledge. I shall willingly cooperate to any investigation related to this case and hereby promise to disclose and not withhold any and all information requested from me, that are necessary to the resolution of this incident report.

**Important Note:** *Because the complainant requested anonymity in this incident report, only the complainant's assigned Alias shall appear in the official documents and notices that will be served to the "respondents" to this incident report. By signing here, the complainant fully authorizes HR to sign on his/her behalf in any document that requires such.*

\_\_\_\_\_  
 Name and Signature of Employee / Date Signed

Received and Reviewed by HR administrator.

\_\_\_\_\_  
 Name and signature of HR Administrator / Date Signed

I acknowledge that I am made aware of the incident reported herein and that as immediate supervisor; I shall do everything in my capacity to make sure discipline is given where it is due. I shall willingly cooperate to any investigation related to this case and hereby promise to disclose and not withhold any and all information requested from me, that are necessary to the resolution of this incident report.

\_\_\_\_\_  
 Name and Immediate Supervisor of Employee / Date Signed