




**SECTION E WITNESS INFORMATION & SUPPORTING DOCUMENTATION**

I believe the following people will corroborate my report of this incident:

NAME OF WITNESS OR CONTACT	AREA CODE	PHONE NUMBER	E-MAIL

Please list and attach any supporting documentation or evidence


**SECTION F ACTION TAKEN TO DATE**

I have taken the following action to address the unacceptable behaviour:

DATE	TIME	LOCATION	ACTION TAKEN

Action taken by other parties on my behalf – e.g. coordinator, admin staff

DATE	TIME	LOCATION	ACTION TAKEN	NAME OF OTHER(S)

Please list the results from any action taken:


**SECTION G NOTICE TO RESPONDENT**

I have  I have not informed the Respondent that a complaint is being filed.

**SECTION H APPROACH TO RESOLUTION**

As a resolution to this matter, I would like the following to occur:


**SECTION I      COMPLAINANT ACKNOWLEDGEMENT**

I understand that -

- Mohawk College will proceed with the appropriate action to resolve this matter
- Maintaining confidentiality is important and that breeches of confidentiality may result in disciplinary action
- I understand that I may have a representative present at any stage of this complaint.

The information I have provided on this form is accurate to the best of my knowledge.

Signed at:

\_\_\_\_\_

(Name of City)

on this date

\_\_\_\_\_

Day    Month    Year

Complainant's Signature

\_\_\_\_\_

*Please note that this document and any attachments to it that you provide in the course of filing a complaint will be held in confidence by the College. The complaint form and its attachments will be disclosed to the respondent(s) named in the complaint and to the investigator and mediators appointed to assist with the resolution of this complaint, as outlined in the policy procedures. Your signature confirms that you have been made aware and give permission for the sharing of this information.*

***Confidential Once Completed***