

PAS UNLAWFUL DISCRIMINATION OR HARASSMENT COMPLAINT FORM

Any volunteer required to report any act of suspected unlawful discrimination or harassment immediately to one of the following persons, in the following order of preference:

- his or her shift leader
- Board President
- Board Vice President
- Board Secretary

The four-tiered reporting system is intended to provide options to volunteers where they might have reason to believe that any shift leader or other individual was implicated in the reported act of unlawful discrimination or harassment. Please supplement this report with additional sheets of paper, as needed.

Name _____

Job title _____ Shift Day/Time _____

Name of Shift Leader _____

What happened? (objectively state details)

Who was involved? (include names of witnesses)

Where did it take place?

When did it take place? (date(s) and time(s))

Did you personally make these observations, or did someone else relay this information to you? If you heard about this from another person, please provide his/her name.

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What is the remedy you are seeking, if any?

Please list the names of anyone you feel should be interviewed in the process of the investigation that could provide useful information

I certify that the foregoing statements made by me are true. I understand that reporting evidence of unlawful discrimination or harassment is my obligation, and that I will not receive any negative or adverse treatment from PAS for making such a report. However, I also understand that false accusations are very serious, and that I may be disciplined for any statements which are knowingly false or malicious.

Signature

Date