

TOWN OF DANVILLE

Employee Complaint Form

This form is for Town of Danville employees only, for the purposes of personnel concerns. The Town takes all employee complaints—including those of discrimination, harassment, unethical conduct or safety violations, as serious matters. So that we may properly investigate your concern, you are requested to fill out this form completely and return it as soon as possible. Please use additional sheets of paper where needed. After a prompt and thorough investigation into your complaint, you will be notified of the Town's intended action. If supervisor intervention or information is needed, relevant details will be provided. Should you have any questions about the process, please set them forth at the end of this form and we'll do our best to answer them. Thank you. This form may be filled out and submitted via email to amallory@danvillein.gov, or printed and turned in directly to HR.

Employee Name (print): _____ Title: _____
Department: _____ Supervisor Name: _____

1. Please describe in as much detail as possible the nature of your complaint.
2. Have you previously discussed your complaint with the other person/parties involved? If not, why?
3. Are there any other employees you know of with a similar complaint?
4. Please describe how the actions you complain about have affected your ability to perform your job.
5. Please describe any solutions you believe can help resolve your complaint. Please provide any additional matter or comments you wish the Town to consider when investigating your complaint (please use additional paper if needed).
6. Please attach or identify all known persons, documents and witnesses to your concerns.

By signing below, I declare that the facts set forth in this complaint form are true and accurate pursuant to the penalty of disciplinary action, including termination.

Employee signature: _____

Date: _____