

Bullying Incident Formal Complaint Form

University of Tennessee, Knoxville values the well-being of its employees and recognizes that bullying in the workplace can significantly impact a person's dignity and their physical and mental health. Hence, UT Knoxville is committed to maintaining a healthy educational and work environment. All employees, as well as those interacting with employees in the course of UT Knoxville's operations, have the right to be treated with dignity and respect. As part of an overall effort to have a positive work culture, UT Knoxville prohibits employees from engaging in bullying.

This form may be used to file a complaint of bullying with the UT Knoxville Office of Human Resources, but it is not required to file a complaint. Formal complaints must filed within 300 days of the most recent incident. Please call or visit the Office of Human Resources located at 105 Student Services Building to speak to the Director of Employee Relations or the Employee Relations Manager to file a complaint. In certain circumstances, at the discretion of HR, complaints filed outside that time limit, or not submitted in writing, may be investigated. You may print this form and submit it directly to HR, or mail to Office of Human Resources, 105 Student Services Building, Knoxville, TN 37996. For the complete policy click here.

Date:				
Personal Information				
Name:		Please indicate your preferred contact method:		
Address:		Email:		
City:		Work Phone:		
St:	Zip:	Home Phone:		
		Cell Phone:		
Affiliation				

Staff Department:
Faculty Position Title:
Temporary Help Pool Supervisor:

Other:



Person Against Whom The Complaint Is Being Filed

Name:
Department:
Title:
Please describe the specific alleged incident including date(s), time(s), location(s), and any witnesses who may have observed and/or experienced similar treatment. Your account is not limited to the space below. You may attach additional materials that may help as we investigate.
How would you like to see this situation resolved and/or what remedy are you seeking?



Acknowledgement

I certify to that the best of my knowledge the information provided is accurate and the events and circumstances are as I have described them. I understand and acknowledge that a copy of this complaint will be provided to the alleged offender. I am willing to cooperate fully with the investigation and provide whatever material the University deems relevant.

While complete confidentiality cannot be guaranteed, I understand that all complaints will be handled in such a way that confidentiality will be protected to the extent possible. Information will be shared on a limited basis only with those who need to know. I further understand that filing a complaint does not preclude me from filing an allegation with an external agency nor does it extend time limits for such a complaint.

UTK does not tolerate adverse treatment of its employees because of the filing of a complaint or of providing information related to a complaint. Any action that may constitute retaliation should be reported to HR immediately.

If you believe you have been retaliated against, please che	ck here.
Signature:	Date:
For HR Use Only:	
Filed within 300 days of the most recent incident	

Employee Relations Staff (Initials)