

Statement of Employee Complaint

(This form is for employee complaints made pursuant to TTU OP 70.10)

Name of Employee: _____

Employing Department: _____

Name of Supervisor: _____

Include only one complaint per form. Additional pages may be used for the same complaint. However, separate forms should be used for new or different complaints.

Provide a clear and concise statement of the complained of behavior and the employment action involved.

Date of alleged action giving rise to the complaint.

Please provide the names and contact information of any witnesses.

What specific resolution do you seek?

Please print and sign this form. Please include all relevant documentation including notices of employment actions, counselings, e-mails, and/or photographs. Once signed, please return to the appropriate administrative supervisor. An employee may present a complaint without fear of retaliation.

You may also seek help in the completion of this statement from Human Resources.

Employee's Signature: _____ Date: _____