

WRITTEN COMPLAINT FORM

Formal Complaint of Discrimination/Harassment Under PRAIRIE SPIRIT SCHOOL DIVISION ADMINISTRATIVE POLICY NO. 505 Harassment Prevention

Your Name:	
Position:	
Home Phone Number:	Work Phone Number:
School/Department:	
Complaint Against:	
Position:	
School/Department:	
The incidents which form the basis of the compla	int took place on:
Describe the incident(s) or event that is the base events): (please place on a separate page if necessary)	is of this complaint (indicate dates and location of
Date	Signature of the Complainant

PLEASE RETURN THE COMPLETED FORM TO:

Prairie Spirit School Division Human Resources P.O. Box 809, 121 Klassen St. East Warman, SK, S0K 4S0

Email: humanresources@spiritsd.ca Phone: 306-683-2800 Fax: 306-934-8221