

Employee Relations – Staff Written Statement

Name

Department

Office Phone #

Cell Phone #

Network ID (i.e. axb12)

- 1. Who is the complaint about (first/last name)?**
- 2. What date(s) did this occur?**
- 3. Where did this occur?**
- 4. Who witnessed this event?**
- 5. What CWRU policy do you believe was violated?**
- 6. Did you report this to the Equity Office?**
- 7. Did you report this to your supervisor?**
- 8. Did you report this to your department HRA?**
- 9. If yes, what was the result?**

Detail all current issues and concerns (*attach additional pages if necessary*)

How would you like to see this resolved (*attach additional pages if necessary*)

Once you have completed this form, please submit it to AskHR@case.edu. Once received, an Employee Relations Investigator will contact you regarding next steps.