

COMPLAINT FORM**HUMAN RIGHTS POLICY AND SAFE AND RESPECTFUL WORKPLACE POLICY**

Please note: This form is used to report alleged breaches of Safe & Respectful Workplace and Workplace Harassment Prevention policy and the Human Rights, Anti-Discrimination and Anti-Racism policy by a DDSB employee. If you need any assistance or accommodation under the Human Rights Code in completing this form, please contact hr.services@ddsb.ca for support. The information in this form will be kept confidential except as noted in the Human Rights Policy, Safe & Respectful Workplace policy and related procedures.

Who can submit: DDSB Employees

How to submit: Submit this form via email to the Superintendent responsible for Human Resources. You can attach additional pages as needed.

***Note:** conduct of parents/families/community members is addressed separately under the school's Code of Conduct.

Your Name (Complainant):

Pronouns:

Your Position:

School/Department/Location:

Your Employee Number:

Phone Number:

Email Address:

Please identify the nature of your complaint below (check all that apply):

- ☐ Disrespectful Conduct
- ☐ Workplace Harassment (non-grounds based)
- ☐ Workplace Harassment/Discrimination on prohibited grounds

Please identify any prohibited grounds that may apply (if applicable):

- | | |
|---|--|
| ☐ Age | ☐ Gender Identity |
| ☐ Ancestry | ☐ Gender Expression |
| ☐ Citizenship | ☐ Marital Status |
| ☐ Colour | ☐ Place of Origin |
| ☐ Creed | ☐ Race |
| ☐ Disability | ☐ Record of Offences |
| ☐ Ethnic Origin | ☐ Sex (Including Pregnancy) |
| ☐ Family Status | ☐ Sexual Orientation |
| ☐ N/A (Not Applicable) | |

Name of Respondent:

Respondent's Job Title/School/Department (if known):

Respondent's Contact Information (if known):

Please provide details including:

- What happened
- Date(s)
- Where
- Witnesses (who might have seen or witnessed the event)

Have you reported this concern to your supervisor? Yes/No (Please explain).

Is there anything else you would like to tell us about this complaint?

Do you require any accommodation under the Ontario Human Rights Code or other supports to take part in a meeting related to your complaint or communicate about your complaint?

Thank you for submitting your complaint. You will receive written confirmation of receipt of your complaint within five (5) working days or as soon as possible thereafter.

Please remember to maintain confidentiality and not discuss your complaint with anyone other than your immediate family, support person, and federation/union or legal representative.

The information contained in this form is of a highly confidential nature and will be protected in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act.

Links to Policies and Procedures

- [Safe and Respectful Workplace and Harassment Prevention Policy](#)
- [Complaints Procedure - Human Rights, Safe and Respectful Workplace and Harassment Prevention Procedure](#)
- [Human Rights, Anti-Discrimination and Anti-Racism Policy](#)