

***Employee Internal Complaint***

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| Employee Name: |       | Title: |       |
| Department/College: |       | Supervisor Name: |       |
| Phone Number: |       | Email Address: |       |
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| Describe in detail the nature of your complaint. Include name(s) of individual(s) involved, witnesses of the incident and documentation you might have. Attach additional sheets as needed |
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| Provide detail information as to how the incident has affected your ability to work effectively.  |
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| Describe any positive solutions, which could effectively resolve your complaint? |
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| Have you made a report or communicated your concerns to any WVSU administrator concerning the incident? Please provide name, title and date. |
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| Provide additional comments that would assist WVSU in dealing with your complaint. Attach additional sheets as needed |
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| I declare that the facts set forth in this complaint form are true and accurate. |
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| Employee Signature |  | Date: |