

Schedule B: Form for Reporting Serious Misconduct

This form should be completed by anyone aware of serious misconduct and forwarded to the appropriate individual as outlined in Section 3.3 – Process for Reporting Serious Misconduct of this policy.

TO BE COMPLETED BY INDIVIDUAL RAISING CONCERN

SUMMARY OF INCIDENT (include dates, times, individuals involved):

I hereby declare that I am raising this concern in good faith and have reasonable grounds to believe the information above is accurate and true.

Signature (optional): _____ Date: _____
(Staff making a report under this policy are encouraged to provide their name in confidence which permits for follow-up questions and clarification if necessary. Investigation may not be possible unless the source of the information is identifiable. The Designate may investigate a report made on an anonymous basis and will determine whether to do so in light of all of the circumstances, including the seriousness of the issue raised, the credibility of the concern and the likelihood of confirming the allegation from other sources).

Date Submitted to Supervisor/Department Head/Manager/Director (if applicable):

Date Submitted to Designate: _____

TO BE COMPLETED BY DESIGNATE

ACTION TAKEN:

Designate Signature: _____ Date: _____

The above information is collected in accordance with the *Freedom of Information and Protection of Privacy Act*. It is collected for purposes set out in the policy Whistleblowing – Reporting, Investigation and Protection. Questions about the collection of this information may be directed to the Director, Library Experience (Privacy Officer) 604 331-4004.