

**HARASSMENT COMPLAINT FORM**

To,  
The Chairperson,  
ICC-POSH Committee  
AIIMS - Mangalagiri

Name of the Complainant:

Department:

Phone Number:

E-mail:

Today's Date:

Subject: \_\_\_\_\_

Name of the alleged accused (Respondent):

Department:

Relationship of the alleged accused to the Complainant (supervisor, co-worker  
etc.):

Phone Number:

E-mail:

**Date of the Incident:**

*(If more than one event, please report each event on a separate form.)*

**Where did the specific event occur?**

**Please explain the events that occurred.**

**How did you react to the situation? Did you take any action to stop perceived inappropriate behavior?**

**Describe the harm you have suffered as a result of the event.**

**Were there any witnesses to this specific event?(If yes, please provide their names.)**

**Is there any physical evidence that supports your complaint? If so, please describe or attach copy of evidence.**

**What is your desired outcome of the investigation?**

The information provided in this complaint is true and correct to the best of my knowledge. I am willing to cooperate fully in the investigation of my complaint and provide whatever evidence deems relevant.

**Signature**

**Date:**

- This form has to be submitted to the ICC-POSH Chairperson, Department of OBG,OPD block, in a closed envelope.
- Instructions: Detailed complaint can be given as annexure.