



**DISCRIMINATION, SEXUAL HARASSMENT, RETALIATION  
AND OTHER INAPPROPRIATE BEHAVIOR POLICY**  
INCIDENT FORM

This form is to be used by employees, supervisors and managers to document complaints or reports of violation of the City of Pensacola's Discrimination, Sexual Harassment, Retaliation and Other Inappropriate Behavior Policy. It is NOT to be used to document instances of workplace violence, fraud or theft, or workers' compensation injury, as specific forms for those purposes are available.

1. IDENTIFY THE PERSON PREPARING THIS FORM

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Department or Division: \_\_\_\_\_

Telephone contacts: \_\_\_\_\_

2. DATE THIS FORM IS PREPARED \_\_\_\_\_

3. IDENTIFY THE SUBJECT OF THE COMPLAINT OR INCIDENT

Discrimination \_\_\_\_\_

If discrimination, specify if based on race, sex, age, disability, religion.

Sexual Harassment in the Workplace \_\_\_\_\_

Retaliation \_\_\_\_\_

Other Inappropriate Conduct \_\_\_\_\_

A Combination of the Above \_\_\_\_\_

4. PROVIDE THE FOLLOWING INFORMATION CONCERNING THE COMPLAINT OR INCIDENT

A. If there is an identifiable victim or complainant, either provide that person's name or state whether the name will be disclosed to the City of Pensacola EEO Officer in order to protect the identity of that person as confidential:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. Identify the person(s) accused of engaging in the conduct specified:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. State when the conduct being complained of occurred, specifying whether it occurred during work time, whether it occurred on more than one occasion, and whether it is continuing to occur:

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D. State where the conduct occurred, specifying whether it occurred at work, on city property, by electronic medium such as email, text message, or other means:

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E. State in detail the nature of the conduct which is asserted to have violated the City's policy prohibiting discrimination, harassment, retaliation or other inappropriate conduct. Additional sheets may be attached to this report, if necessary:

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Continuation Sheets # \_\_\_\_\_

F. State the identity of any witnesses to the conduct being reported, or state that the identity of such person(s) will be provided to the City of Pensacola EEO Officer:

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G. If there are any documents or other evidence available that pertain to the conduct being reported, attached copies to this form, number and identify them below and provide them to the City EEO Officer.

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H. If any actions have been taken by the person preparing this Report Form to stop or correct the conduct being reported on, or to counsel or discipline the person(s) accused of engaging in conduct violating City policy, specify the actions taken. Additional sheets may be attached to this report, if necessary: \_\_\_\_\_

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Continuation Sheets # \_\_\_\_\_

\_\_\_\_\_  
Printed Name of the Person Completing Form

\_\_\_\_\_  
Signature of the Person Completing Form

\_\_\_\_\_  
Date

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Instructions:

1. The original and all attachments to this report form must be delivered to the City of Pensacola EEO Officer immediately upon its completion.
2. The person preparing this form must keep a copy of it and any attachments.
3. All employees having knowledge of the contents of this report form are directed to refrain from disseminating that knowledge or discussing it with anyone not authorized to assist in investigating or resolving the matters described herein.