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| --- | --- |
| **Initial Report**  Section filled out by reporting party | **Description of Issue** |
| Click or tap here to enter text.  *\*Can also include here what happened, why it happened, etc.* |
| **Involved Parties (complainant, etc.)** |
| Click or tap here to enter text. |
| **Incident Evaluation**  Section filled out by Evaluator | **Type of Complaint** |
| Choose an item. |
| **Details of Investigation** |
| Click or tap here to enter text. |
| **Outcome/Result of Investigation** |
| Click or tap here to enter text. |
| **Decisions**  Section filled out by Decision maker | **Action(s) Suggested (if applicable)** |
| Click or tap here to enter text. |
| **Has the Complainant Been Informed of the Outcome?** |
| Choose an item.  *\*Retain notification record* |
| **Considerations** |
| Click or tap here to enter text. |

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| --- | --- |
| **Reviewed by:** |  |
| **Title of Reviewer:** |  |
| **Date reviewed:** |  |
| **Approved by:** |  |
| **Title of approver:** |  |
| **Date approved:** |  |