



PART E: REPORTING REQUIREMENTS AND DOCUMENTS

ATTACHMENT E1: CONFIDENTIAL RECORD OF INFORMAL COMPLAINT

Name of person receiving complaint		Date: / /
Complainant's Name	<input type="checkbox"/> Over 18 <input type="checkbox"/> Under 18	
Role/status	<input type="checkbox"/> Administrator (volunteer) <input type="checkbox"/> Parent <input type="checkbox"/> Rider <input type="checkbox"/> Spectator <input type="checkbox"/> Coach/Assistant Coach <input type="checkbox"/> Support Personnel <input type="checkbox"/> Employee (paid) <input type="checkbox"/> Other <input type="checkbox"/> Official	
When/where did the incident take place?		
What are the facts relating to the incident, as stated by complainant?		
What is the nature of the complaint? (category/basis/grounds) Tick more than one box if necessary	<input type="checkbox"/> Harassment or <input type="checkbox"/> Discrimination <input type="checkbox"/> Sexual/sexist <input type="checkbox"/> Selection dispute <input type="checkbox"/> Coaching methods <input type="checkbox"/> Sexuality <input type="checkbox"/> Personality clash <input type="checkbox"/> Verbal abuse <input type="checkbox"/> Race <input type="checkbox"/> Bullying <input type="checkbox"/> Physical abuse <input type="checkbox"/> Religion <input type="checkbox"/> Disability <input type="checkbox"/> Victimisation <input type="checkbox"/> Pregnancy <input type="checkbox"/> Child Abuse <input type="checkbox"/> Unfair decision <input type="checkbox"/> Other	
What does the complainant want to happen to resolve the issue?		
What other information has the complainant provided?		
What is the complainant going to do now?		

This record and any notes must be kept in a confidential and safe place. Do not enter it on a computer system. If the issue becomes a formal complaint, this record is to be given to PCT Secretary.