**Policy Violation Reporting Form**

**Section A: Employee Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Name | John Williams | Employee ID | EMP-204 |
| Department | Finance | Position | Accounts Officer |
| Contact Number | 0333-4567890 | Email Address | john.williams@company.com |
| Date of Report | 12-Jan-2025 |  |  |

**Section B: Details of Policy Violation**

|  |  |  |  |
| --- | --- | --- | --- |
| Type of Violation | (e.g., Code of Conduct, Safety, Data Security, Attendance, Ethics) | | |
| Date of Incident | 10-Jan-2025 | Time of Incident | 3:45 PM |
| Location | Finance Office – Room 12 | Policy/Rule Violated | “Professional Behavior and Respect Policy” Clause 4.2 |
| Description of Incident | Mr. Ahmed used abusive language during a financial review meeting and threw documents on the table, causing distress among team members. | | |

**Section C: People Involved**

|  |  |  |  |
| --- | --- | --- | --- |
| **Role** | **Name** | **Department** | **Contact** |
| Person Violating Policy | Ahmed Khan | Finance | 0333-2223344 |
| Others Involved | Sarah Ali | HR | 0321-7778899 |
| Supervisor/Manager Informed | Maria Smith | Finance | 0300-1112233 |

**Section D: Witness Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Witness Name** | **Department** | **Contact** | **Statement (optional)** |
| Ali Raza | Finance | 0345-9988776 | Witnessed the argument and confirmed inappropriate language. |

**Section E: Evidence Provided**

Tick/check all that apply:

* ☐ Written statements
* ☐ Emails or messages
* ☐ Photographs or video
* ☐ Documents or reports
* ☐ Audio recordings
* ☐ Other (Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Sample:* ✔ Emails and written statements.

**Section F: Action Requested / Preferred Resolution**

| **Requested Action** | **Sample Entry** |
| --- | --- |
| (e.g., HR investigation, mediation, disciplinary action, training, written warning) | HR investigation and corrective action |

**Section G: Reporter Declaration**

I hereby confirm that the information provided in this form is accurate to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Signature | John Williams | Date | 12-Jan-2025 |

**Section H: For HR / Management Use Only**

|  |  |  |  |
| --- | --- | --- | --- |
| Date Received |  | Received By |  |
| Case Number |  | Initial Review Notes |  |
| Assigned Investigator |  | Follow-up Actions |  |
| Final Decision |  | Closure Date |  |