**Wrongful Termination Complaint Form**

1. **Employee Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name | Ayesha Khan | Employee ID | EMP-2045 |
| Department | Sales | Position / Job Title | Sales Executive |
| Contact Number | 0300-1234567 | Email Address | ayesha.khan@email.com |
| Supervisor’s Name | Mr. Imran Ali |  |  |

1. **Termination Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Termination | 10-Oct-2025 | Method of Notice | Written / Verbal / Email |
| Person Who Issued Notice | HR Manager – Ms. Sadaf Noor | Reason Provided by Employer (if any) | “Unsatisfactory performance” |
| Last Working Day (LWD) | 10-Oct-2025 |  |  |

**C. Basis of Wrongful Termination Claim**

Tick all that apply:

* ☐ Terminated without proper notice
* ☐ Terminated without valid reason
* ☐ Retaliation for reporting misconduct
* ☐ Violation of employment contract
* ☐ Discrimination (gender, race, disability, etc.)
* ☐ Harassment-related termination
* ☐ Termination due to personal conflict with supervisor
* ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**D. Description of Incident**

*(Provide a clear and detailed account of why you believe the termination was wrongful. Include dates, conversations, and any relevant events.)*

**Sample Entry:**  
“I was terminated without any prior warning or performance review. My termination came shortly after I reported unethical sales practices within the team. No investigation was conducted, and HR did not discuss the claim with me.”

**E. Supporting Evidence**

Check the evidence you are submitting:

* ☐ Emails
* ☐ Text messages / WhatsApp chats
* ☐ Witness statements
* ☐ Performance reviews
* ☐ Employment contract
* ☐ Medical records (if relevant)
* ☐ Disciplinary letters
* ☐ Other documents: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**F. Witness Information (if any)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Witness Name** | **Department/Role** | **Contact Info** | **Relationship to Case** |
| Example: Sonia Raza | Sales Coordinator | 0312-7865432 | Witnessed discussion |

**G. Requested Resolution**

What outcome are you seeking?

* ☐ Reinstatement of employment
* ☐ Compensation for lost wages
* ☐ Correction of personnel records
* ☐ Apology from management
* ☐ Internal investigation
* ☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**H. Employee Declaration**

I hereby declare that the information provided in this complaint is true and accurate to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Employee Name |  | Signature |  |
| Date |  |  |  |

1. **HR Use Only (Internal Section)**

|  |  |  |  |
| --- | --- | --- | --- |
| Date Complaint Received |  | HR Representative Assigned |  |
| Case Reference Number |  | Investigation Outcome |  |
| Action Taken |  | Closure Date |  |