Employee Complaint Form

The Human Resources Department encourages you to contact our office if you have a complaint or concern, or experience a problem that affects you or your co-workers. We ask that you complete this form within five working days after the incident or problem first occurred. Human Resources will contact you as soon as possible.

What should I expect from the company if my complaint is formally investigated?

You can expect a fair, thorough, and impartial investigation if your complaint involves misconduct that is deemed by human resources to warrant a formal investigation. Finding the unbiased truth will be the goal of any investigation conducted by human resources. You will be notified of the results once the investigation is concluded. Most investigations are completed within a thirty-day timeframe but timeline extensions are sometimes necessary during the investigative process.

Name (Print)__________________________________________________________

Telephone # ________________________________________________________

1. Please describe the decision or circumstances causing your complaint (give specific factual details).
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   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
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2. Are there others who have witnessed this behavior or others who experienced similar behavior by the individual named above? If so, provide their name(s), indicate if witness or individual with similar experience.
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

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3. Please describe any efforts you have made to resolve your complaint informally and the responses to your efforts.

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4. Please describe the outcome or remedy you seek for this complaint.

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5. Please describe what measures can be taken to avoid a repeat of your complaint.

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6. Attach to this form any documents you believe will support the complaint; if unavailable when you submit this form, they may be presented no later than the interview. Please keep a copy of the completed form and any supporting documentation for your records.

By signing below, the Complainant certifies that he/she has reviewed this Complaint (including any attachments) to confirm that it is accurate and complete.

Complainant's Signature ___________________________ Date ___________________________

Filing Instructions: This form (and all attachments) should be submitted to Human Resources either by (a) email (report@mountainalarm.com) with “Complaint” in the subject line of the email. (b) U.S. mail or personal delivery to Human Resources – PO Box 12487 Ogden, UT 84412-2487.