

# HR COMPLAINT FORM

Date of filling the HR complaint form:	
Hr. Complaint Form Number:	
Full name of the person filing the complaint:	
Signature of the person filing the complaint	
Proof of identification:	
Date of birth:	
Employee status of the person in the organization/institute:	
Nature of the complaint made:	
Name of the person against whom the complaint is made:	

## The main points of the allegation:

The effect on the person filing the complaint:	

## Any other relevant information:

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Signature of the authority with official seal: \_\_\_\_\_