

TECHNOCON GROUP

TECHNOCON SERVICES | TEKNOELECTRIKOL MANAGED SERVICES PRIVATE LIMITED |
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| TEKNOLOGIKOL LOGISTICS PRIVATE LIMITED | TEKNOMOTO AUTOMART PRIVATE LIMITED |
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Complaint Form (POSH)

This format can be used by any female employee who wishes to lodge a complaint of Sexual Harassment at Workplace

(Any information / details provided by the Aggrieved Individual / Complainant shall be kept confidential)

❖ Section 1: Details of the Aggrieved Individual / Victim

Name	
Designation	
Division/Unit/Department	
Contact Number	
Address (office)	

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(If applicable) Details of Complainant who is filling the form on behalf of the aggrieved individual / victim.

Name	
Relationship with Aggrieved Individual (Victim)	
Designation (if Complainant is an employee)	
Division/Unit/Dept.(if Complainant is an employee)	
Contact number	
Address (office/administrative unit where the complainant works)	

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Reason for which Aggrieved Individual is unable to file the complaint	Physical incapacity	☐
	Mental incapacity	☐
	Death	☐
	Any other reason	

❖ Section 2: Details of the Alleged Harasser

Name	
Designation	
Division / Unit / Department	
Contact Number	
Address (place of work of the alleged harasser)	

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❖ Section 3: Details of the Incident

Description of the incident	
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Other details (if the incident was repeated / any previous related incident)	
Date and Time of the Incident / Incidents	

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Details witness /witnesses	1. 2. 3. 4. 5.
Details of any documents available (E.g. Messages, email, letter etc.)	
Details of any persons contacted by the aggrieved individual after the incident (If any)	
Any other relevant information / comments	

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❖ Section 4:

**Any additional information and comments
if any:**

❖ Section 5:

Name of the Aggrieved Individual:

Signature

Date:

Name of the complainant (If applicable):

Signature

Date:

Please note: Signature of the Aggrieved Employee/Complainant on the bottom of every sheet.