

UNION FACT SHEET

APPENDIX 11

Harassment/Poison Workplace

What is the harassing behavior that the grievor says took place?

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Who does the grievor say was harassing him/her?

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How long has the harassment taken place?

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What has the grievor done about the harassment prior to approaching you?

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Are there any witnesses to the harassment?

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Does the grievor have documentation of the harassment?

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FORM #UFSA11/00