Equality, Diversity & Inclusion Report Form

Please complete this form with as much detail as possible. The information you provide will only be shared where absolutely necessary to ensure that a full investigation can be carried out and we will contact you in advance of each step to keep you informed.

Section 1 – Your details	
Name	
Address	
Postcode	
Contact number	
Relationship to Grampian Heart & Health e.g. employee	

Section 2 – Details of the person you are reporting	
Name	
Position held within Grampian Heart & Health e.g. Trustee	

Section 3 – Details of incident	
Date and time of incident	
Location of incident	
Were any other individuals with you at the time or were also involved? If yes, please provide details e.g. witnesses or any additional individual/s involved in the incident	
Please provide a clear, factual and concise description of the incident	

Section 5 – Evidence
Please provide details of any relevant documents, photographs, emails or other evidence, and attach these when you submit this form if possible.

Section 6 – Resolution and follow up
Please outline your desired resolution e.g. what you hope to achieve (e.g. letter of apology, disciplinary action, policy change)

Section 7 – How would you like to be contacted?
Please provide details of how you would like us to contact you e.g. telephone number, email address, face-face meeting etc

Please send the completed form to Lindsay Milligan lindsay.milligan@gcra.org.uk or Chairperson Bert Lyon abielyon@hotmail.co.uk as appropriate.

OFFICE USE ONLY	
Date received	
Person dealing with report	

Follow up with person reporting e.g. additional information

Action/s

Outcome/s

Date of completion	