

Warren-Newport Public Library District **Staff Manual**

703 Harassment, Discrimination and Retaliation

Effective Date: 07/12/2006

Revision Date: 02/08/2013; 01/16/2018*; 2/16/2021

*Title changed from Sexual and Other Unlawful Harassment

The Warren-Newport Public Library District (WNPLD) is committed to maintaining a work environment free of harassment, discrimination and retaliation. In keeping with that commitment, the WNPLD Board of Trustees has established Board Policy 1061 Harassment, Discrimination and Retaliation, pursuant to the State Officials and Employees Ethics Act 5. [ILCS 430/70-5]

Because Board Policy 1061 Harassment, Discrimination and Retaliation applies to others in addition to employees, this policy is included in the WNPLD Board of Trustees Policy Manual. An incident report form is included. Policy 1061 can also be found on the Library website at:

<https://www.wnpl.info/wp-content/uploads/policies/1061.pdf>

WNPLD provides ongoing training on these concepts to ensure you the opportunity to work in an environment free of harassment, discrimination, and retaliation.

Warren-Newport Public Library District
Lake County, Illinois

INVESTIGATION: HARASSMENT COMPLAINT FORM

Today's date: _____

Name of the Complainant: _____

Department: _____

Email: _____ Phone: _____

Name of the Accused: _____

Department: _____

Relationship of the Accused to the Complainant (manager/supervisor, co-worker, trustee, patron, vendor, etc.):

Email: _____ Phone: _____

Date of Incident: _____

Where did the specific event occur?

Please explain the events that occurred.

How did you react to the situation? Did you take any action to stop perceived inappropriate behavior?

What do you feel might be the result of reading or viewing this material?

Describe the harm you have suffered as a result of the event.

Where there any witnesses to this specific event? (If yes, please provide their names.)

Is there any evidence that supports your complaint? If so, please describe or attach copy of evidence.

What would be your desired outcome of the investigation?

The information provided in this complaint is true and correct to the best of my knowledge. I am willing to cooperate fully in the investigation of my complaint and provide whatever evidence the Warren-Newport Public Library deems relevant.

Signature: _____ Date: _____

Please return this form to Human Resources.