

TCSS HR Investigation Form

Administrator or Employee Reporting (their title and location):

Location of Incident:

Date:

Employee in Question, Title and Location:

Complaint/Charge (If it is a breach of Policy or Code of Ethics please list it):

List Witnesses and have them type or write a statement, with date and signature:

- 1.
- 2.
- 3.
- 4.

Description of incident:

Evidence: YES NO

If yes, please list:

Video: YES NO

If yes, please describe what is in the video:

Conclusion with Recommendation: