

Complaint form

Discrimination, Bullying and Harassment Complaints Management Procedure



This form can be used to make a complaint to the College arising from the College's *Discrimination, Bullying and Harassment Policy*. We recommend that you read the Policy, and the accompanying Procedure, before completing and submitting this form.

This form should be used to make a complaint in relation to conduct which occurred in connection with the College's activities. If you are concerned about discrimination, bullying or harassment which has occurred in the workplace, please make a complaint through your employer's human resources department or other appropriate complaint handling body.

We understand that experiencing discrimination, bullying and harassment and making a complaint about such conduct can be a stressful experience. The College will be able to provide you with support through the complaints management process, and ensure that making a complaint about discrimination, bullying or harassment will not result in you experiencing any unfair disadvantage in your association with the College in the future.

Any information provided on this form will be kept confidential unless you consent to its disclosure. It will be managed in accordance with the College's Privacy Policy, which can be found on the College's website.

If you have any queries while completing this form, please contact legalservices@ranzcp.org for information.

Your details

You may lodge a complaint anonymously or in a way which identifies you. Lodging an anonymous complaint may impact the way in which the complaint is managed or resolved.

Full Name: _____

College Membership number (if applicable): _____

Postal address: _____

Email address: _____

Phone number: _____

I am a (please tick):

Fellow Trainee Specialist International Medical Graduate

Trainee supervisor Other: _____

Your privacy and signature

By signing this document, you acknowledge that:

- if you have made this complaint anonymously, this may impact the way that your complaint is managed and resolved
- any information provided in this form and in the course of the complaints management process will be kept confidential and managed in accordance with the College's Privacy Policy, which is available on the College's website.

Full name: _____
Signature: _____
Date: _____

Please submit this form via post to:

Chief Executive Officer
Royal Australian and New Zealand College of Psychiatrists
309 La Trobe Street
MELBOURNE VIC 3000

Or via email to: legalservices@ranzcp.org

After receiving your complaint, a member of the College staff will contact you to acknowledge receipt of your complaint and provide you with further information about the process.

Support

We understand that experiencing discrimination, bullying and harassment and making a complaint about such conduct can be a stressful experience. If you need support throughout the complaint management process, please contact the Member Welfare Support Line on:

1800 941 002 (Australia)
0800 220 728 (New Zealand)

or via email at: support@ranzcp.org.

You may also wish to visit the [College's website](#) for more information about the wellbeing supports available to you.

REVISION RECORD

Contact:	Legal Officer		
Date	Version	Approver	Description
08/2021	1	Board B2021/10 R6	New document

NEXT REVIEW
