

North Star Mohican Casino & Resort (NSMCR) Initial Employee Anti-Harassment Form

Initiating the Anti-Harassment Process: I understand by completing the initial employee Anti-Harassment form this does not constitute it as a violation to the Anti-Harassment Policy. The form will be reviewed by the Employee Relations Representative to define what will warrant an investigation in accordance to the Employment Manual, as well as Chapter 53 (SMC Employee Rights Ordinance).

(Alleged Target) Employee name / Contact Info:	Job Title / Shift:	Department / Supervisor:
(Alleged Harasser) Employee name / Contact Info:	Job Title / Shift:	Department / Supervisor:

Employee is submitting anti-harassment form for the following reasons:

Type of reason(s):

___ Forms of harassment that interfere with job performance or create a hostile or offensive working environment including, but not limited to intimidating or discourteous conduct, including harassing or discourteous emails, persistently bothering, disturbing or tormenting another person, as well as derogatory jokes or comments relating to race, color, national origin, age, handicap, religion, sex or sexual orientation. **EMPLOYEE PROVIDES: 1)** What has been violated by page and section, and **2)** Supporting documentation of alleged incident.

___ Unwelcome verbal or physical contact of a sexual nature includes, but is not limited to, deliberately and repeatedly making unsolicited gestures or comments of a sexual nature, displaying offensive sexually graphic materials, verbal or physical conduct of a sexual nature, whether or not repeated, that is sufficiently severe to interfere substantially with an employee's work performance or to create an intimidating, hostile or offensive work environment. **EMPLOYEE DEFINES:** Sexual offensive and **EMPLOYEE PROVIDES:** Supporting documentation of alleged violation.

___ Retaliation or reprisal against any employee who files a complaint or provides information related to the complaint. **EMPLOYEE DEFINES:** Retaliation or reprisal, and **EMPLOYEE PROVIDES:** Supporting documentation of alleged violation.

Please initial by each line that documents have been attached to form for submission.

- ___ Timeline of events (date(s), time(s), place(s), people involved, etc.)
- ___ Emails, letters, messages (voice, social media or etc.), surveillance footage or etc.
- ___ Witnesses (First and last name, department and job title)

Employee requests the following solution to resolve the complaint. If the request is fulfilled, the matter is closed:

Employee Signature: _____ Date: _____

<p>Confidentiality - As an employee of NSMCR who has initiated the Anti-Harassment Process I agree to adhere to strict confidentiality. I agree not to repeat any of the information I may hear as part of the Anti-Harassment Process. I understand that if I break confidentiality I will be subject to disciplinary action.</p> <p>Retaliation - I also understand that the NSMCR will not tolerate any retaliation against any employee who files a complaint/grievance or provides information related to the complaint/grievance Remember to keep your focus on your work and keep your interaction neutral, civil and job related. NSMCR does expect you to be cordial and polite. It's not OK to refuse to speak to the person or spread rumors or false accusations. Violation of these simple rules could result in disciplinary action.</p>	<p>Date Received: _____</p> <p>Representative: _____</p>
--	--