

Incident Report

Date: [Insert Date]

To: [Supervisor/HR Manager's Name]

From: [Your Name]

Department: [Your Department]

Subject: Report of Workplace Discrimination

Incident Details

Date and Time of Incident: [Insert Date and Time]

Location: [Insert Location]

Description of Incident:

[Provide a detailed account of the incident, including who was involved, what happened, and any witnesses present.]

Impact of the Incident

[Describe how the incident affected you or your work environment.]

Actions Taken

[Explain any actions you took in response to the incident and any communications you have had about it.]

Requested Actions

[Specify what actions you would like from management or HR in response to your report.]

Thank you for addressing this serious matter. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Job Title]

[Your Contact Information]