

ABUSIVE SUPERVISOR INCIDENT WORKSHEET

Your Name _____ Date _____

Supervisor's Name _____ Duty Station _____

Date of Incident _____ Time of Incident _____

Location of Incident _____

Date Union Notified _____

Victim(s) of Incident _____

Witnesses to Incident _____

Description of Abusive Incident _____

Provoked or Unprovoked _____

EEO Previously Filed? _____ EEO for this Event? _____

NATURE OF ABUSIVE EVENT (Check All That Apply)

1) Overly Demeaning _____ 2) Demeaning _____

3) Sarcastic Remarks _____ 4) Yelling _____

5) Threats of Discipline or Discharge _____ 6) Threats to take Victim off Clock _____

7) Other Specific Threats _____ 8) Profanity _____

9) Physical Threats _____ 10) Physical Gestures _____

11) Physical Contact _____ 12) Other Specifics _____

OTHER COMMENTS

Signature _____ Date _____