Appendix

ANTI-HARASSMENT POLICY COMPLAINT FORM

The Andrew W. Mellon Foundation (the "Foundation") is committed to a work environment in which all individuals are treated with respect and dignity. Each individual has the right to work in an environment that is free of discriminatory practices and behavior, including harassment.

If you are aware of, have observed, or believe that you have been subjected to sexual harassment or discriminatory behavior or practices, you are encouraged to report this to the Executive Vice President, Chief Operating Officer, General Counsel and Secretary and/or the Director of Human Resources, as described in the Equal Opportunity and Anti-Harassment Policy. If you do not wish to use the form, you may report the matter verbally or in writing directly, or by utilizing the Foundation’s anonymous reporting tool, EthicsPoint (www.mellon.ethicspoint.com or 1-844-446-5361). The Foundation prohibits retaliation against any individual who in good faith reports discrimination or harassment or participates in any investigation of such reports.

COMPLAINANT INFORMATION

Name:  
Work Address:  Work Phone: 

Job Title:  Email: 
Select Preferred Communication Method:  □ Email  □ Phone  □ In person

SUPERVISORY INFORMATION

Immediate Supervisor’s Name: 
Title: 
Work Phone:  Work Address: 

Please indicate/describe if you have discussed this matter with your supervisor or if you believe that the supervisor is aware of this issue.
COMPLAINT INFORMATION

1. Your complaint of Sexual (or other) Harassment is made about:

   Name:  
   Title:  
   Work Address:  
   Work Phone:  
   Relationship to you:  [ ] Supervisor  [ ] Subordinate  [ ] Co-Worker  [ ] Other

2. Please describe what happened and how it is affecting you and your work. Please use additional sheets of paper if necessary and attach any relevant documents or evidence.

3. Date(s) sexual (or other) harassment occurred:

   Is the harassment continuing?  [ ] Yes  [ ] No

4. Please list the name and contact information of any witnesses or individuals who may have information related to your complaint:

   [ ]

   The last question is optional, but may help the investigation.

5. Have you previously complained or provided information (verbal or written) about related incidents? If yes, when and to whom did you complain or provide information?

   [ ]

   As described fully in the Equal Opportunity and Anti-Harassment Policy, in addition to filing a complaint internally, there are federal, state and city agencies with whom a complaint may be filed, without retaining legal counsel.

   [ ]

   Signature: __________________________  Date: __________________