

ANNEX I. COMPLAINT MODEL.

SEX-BASED OR SEXUAL HARASSMENT INTERVENTION REQUEST

APPLICANT

- ☐ Affected person ☐ Affected directive unit ☐ Others (specify):
- ☐ Workers representatives: Staff meeting / Work Council or Staff Delegates

TYPE OF HARASSMENT

- ☐ Sexual ☐ Sex-based ☐ Sexual orientation and/or gender expression

PERSONAL DATA

Name and surname _____ NIF _____ Sex ☐ M ☐ F ☐ NA

Contact telephone _____

PROFESSIONAL DATA OF THE AFFECTED PERSON

Institute/centre (ICU) _____ Directive unit _____

Employment relationship

- ☐ Civil servant ☐ Interim ☐ Permanent contract ☐ Temporary contract ☐ Other

DESCRIPTION OF THE EVENTS

ATTACHED DOCUMENTATION

- ☐ YES (specify) _____ ☐ NO

REQUEST

- ☐ I request the formal start of the *Prevention and intervention protocol against sexual and sex-based harassment at CSIC*.

I declare that I have read and understood the basic information about data protection described in the back of this application form.

Place and date

Signature of the interested person

DEPUTY SECRETARY GENERAL FOR HUMAN RESOURCES. SEGE. CSIC