

Complainant's Witnesses: _____

 (Names) (Position)

Date: _____ Interviewed: _____

Name of Witness: _____

Response:

Date: _____ Interviewed: _____

Name of Witness: _____

Response:

Respondent's Witnesses: _____

 (Names) (Position)

Date: _____ Interviewed: _____

Name of Witness: _____

Response:

Date: _____ Interviewed: _____

Name of Witness: _____

Response:

Other Records/Documents Reviewed:

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Summary of Review of Above Records/Documents:

Investigator's Summary:

Suggested Corrective Action:

Investigator's Signature

Date