



Central Philippine University
HUMAN RESOURCE DEVELOPMENT OFFICE

PERSONNEL COMPLAINT FORM

To: _____

Date: (MM-DD-YY): _____

Name of Employee: _____

College/Dep't./Unit: _____ Designation: _____

Details of the complaint: (use back page if needed)

Signature of Employee: _____

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To be filled out by HRDO

Date Received: (MM-DD-YY) _____ Complaint No.: _____

Xc of Complaint to: _____ Employee
Original to HRDO

Action Taken on the complaint:

Signature of HRD Director: _____ Date: (MM-DD-YY) _____

Complaints – are situations causing conflicts among employees due to a violation of the CPU Rules and Regulations