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اذا رغبت بالحصول على نسخة مترجمة من هذه الوثيقة يرجى الاتصال بنا على 01983 821000

Bengali এই দলিলটির অনুবাদ চাইলে, দয়া করে ফোন করুন: 01983 821000

Chinese

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यदि आप इस दस्तावेज़ का अनुवाद चाहते हैं, तो कृप्या टेलिफोन नम्बर 01983 821000 पर सम्पर्क कीजिए।

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Spanish

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اگرآپ اس دستاویز کا ترجمه حاصل کرنا چاہتے ہیں تواس نمبر پر فون کریں 821000 81983

This publication is available on request in large print, audiotape or Braille and in other languages. For further details please contact the Community Safety Service on (01983) 821000. (Typetalk available).









Isle of Wight

Diversity incident reporting form

Help us to see what's happening. Make this a safe and fair place to live and work free from inequality and harassment.











council 4pp div form NS 10/11/08 12:01 PM Page 3



Use this form to report any diversity incident that you may have experienced, witnessed, or are reporting on behalf of someone else.

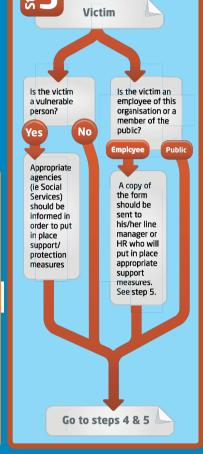
Incidents involving members of the public may be recorded and referred to the Hampshire and Isle of Wight Police for investigation. You can report all types of diversity incidents including damage, assault, verbal abuse and harassment. The form can be used to report a diversity incident as a witness or as a victim. Sometimes you may feel that the incident is too minor to report. It is, however, still important to tell us what's happened so we can aim to provide a safe place to live and work.

Processing a multi-agency Diversity Incident Reporting Form

Racist, homophobic, gender or any other hate incident is experienced, witnessed or reported by a third party















For more information

Contact: **The Community Safety Service**, Charter House, 14 St Thomas Square, Newport Isle of Wight P030 1SL Telephone: (01983) **821000** E-mail: **community.safety@iow.gov.uk**

Reporting diversity incidents

CONTACT DETAILS
How would you like this report dealt with?
Formally investigated No further action taken
NB: We can not carry out an investigation unless you state
Your Name - Please tick here if you prefer not to say your name but this will be logged as an incident.
Vous contact details. Disease tiels have if you profess not to say.
Your contact details - Please tick here if you prefer not to say
Please tell us how you would like to be contacted - Please tick here if you prefer not to say
ABOUT THE INCIDENT
Are you? Victim witness third party
*If reporting as a witness or third party, if possible please include
your contact details or contact details of the individual involved
What was the nature of the incident? (tick all that apply)
racism religion disability homophobia (sexual orientation)
transphobia (transgender) ageism gender bullying other
transprioua (transgender) ageism gender bunying other
Describe the incident in your own words, give as much detail as possible. Use a separate sheet if necessary
Have you reported this to anyone else? YES NO
If yes, who did you report it to, when was it reported?

WHEN COMPLETED, PLEASE RETURN THIS FORM TO:

The Community Safety Service, Charter House, 14 St Thomas Square, Newport, Isle of Wight P030 1SL Telephone: (01983) 821000 E-mail: community.safety@iow.gov.uk