

# Internal Complaint Review Checklist

Directions: Complete all sections of this checklist during the internal review process. Print the completed form for physical record keeping.

## 1. General Case Information

Case Reference Number:

Reviewer Name/Title:

Date Complaint Received:

Date Review Initiated:

Complainant Name (Optional):

Respondent Name (if applicable):

## 2. Intake and Initial Assessment

Review Item	Status (Completed / Pending / NA)	Date Completed	Notes / Comments
Complaint received through official channel and logged	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Acknowledgment of receipt sent to complainant	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Initial conflict of interest check completed for reviewers	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Jurisdiction/Applicability of complaint confirmed	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>

## 3. Investigation Process

Review Item	Status (Completed / Pending / NA)	Date Completed	Notes / Comments
Investigation plan developed and approved	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Evidence collected and secured (emails, logs, physical documents)	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Complainant interviewed and statement documented	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Respondent interviewed and statement documented	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Witnesses identified and interviewed (if any)	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>

## 4. Findings and Resolution

Review Item	Status (Completed / Pending / NA)	Date Completed	Notes / Comments
Draft investigation report prepared	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Legal/HR review of findings conducted	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Final decision/action plan approved by authority	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Outcome formally communicated to complainant	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>
Outcome formally communicated to respondent	<input type="text" value="Status"/>	<input type="text" value="YYYY-MM-DD"/>	<input type="text"/>

## 5. Follow-Up and Closure

Review Item	Status (Completed / Pending / NA)	Date Completed	Notes / Comments
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Review Item	Status (Completed / Pending / NA)	Date Completed	Notes / Comments
Corrective actions implemented	Status	YYYY-MM-DD	
All documentation archived securely	Status	YYYY-MM-DD	
Case officially marked as closed in system	Status	YYYY-MM-DD	

## 6. Final Sign-Off

Reviewer Signature (Physical Sign-off): \_\_\_\_\_

Date of Final Sign-Off: YYYY-MM-DD