



CODE OF CONDUCT – REPORT FORM

To be completed by the complainant and provided to Deborah E. Mikula, Executive Director (517) 394-2774 or dmikula@milibraries.org or the current President of MLA whose contact information can be identified by calling (517) 394-2774 or emailing MLA@Milibraries.org.

Complainant's Name: _____ **Date Submitted :** _____

Location of Incident(s): _____

Date of Incident(s): _____

Person(s) Involved: _____
(if unknown list identifying information such as appearance)

Description of the alleged violation of Code of Conduct (*attach additional sheets if needed*):

Please list all witnesses to each event (include date event witnessed):

Please read below statement and sign:

I, the complainant, understand that this form will be forwarded to the MLA Executive Director and in some instances MLA Leadership or an outside investigator for a thorough investigation of the alleged violation of the MLA Code of Conduct. I understand MLA will maintain confidentiality of my identity to the extent possible.

I further attest that any statements made by me related to this matter are true.

Complainant Signature: _____

Date: _____

TO BE COMPLETED BY MLA: *Date of Receipt:* _____

