**Behaviour Complaints – Response Form**

Please read the City of Busselton’s Council policy: Management of Complaints of Alleged Breaches of Behaviour before responding to a complaint. The Policy details:

* how the City of Busselton will process and determine a Behaviour Complaint; and
* how confidentiality of the complaint will be handled.

The purpose of this form is to enable a person against whom a complaint under the City’s Code of Conduct has been made (the Respondent) to:

* be notified of the allegation
* provide an opportunity to respond to the allegation

The Respondent will have 7 days to respond.

**Need Advice?**

If you require advice in responding to a Behaviour Complaint, please contact the City of Busselton’s Complaints Officer on (08) 9781 0486 or sarah.pierson@busselton.wa.gov.au

**Response Form –**

**Code of Conduct for Council Members, Committee Members and Candidates**

**SECTION 1:**

To be completed by an Authorised Person (City’s Complaints Officer):

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| **Name of the person who is making the complaint:** |
| **Name:** **Given Name(s) Family Name** |

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| **Name of the local government (city, town, shire) concerned:** |
| **City of Busselton** |

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| **Name of the council member, committee member, candidate alleged to have committed the breach:** |
| **Name:** **Given Name(s) Family Name** |

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| **Details of the alleged breach:** |
| ***Attach copy of complaint form if relevant.*** |
| **Date of the alleged breach:** |
| **/ /20** |

**SECTION 2:**

To be completed by the Respondent:

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| **Contact details of the person to whom the complaint relates:**  |
| **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **Response to the alleged breach:** *Attach any supporting evidence to this form* |
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| **Signed:** |
| **Respondents signature: …………………………………………………………………………………………………………………………..****Date of signing: / /20** |

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| **Received by Authorised Officer** |
| **Authorised Officers’ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Given Name(s) Family Name****Authorised Officers’ Signature: ………………………………………………………………………………………………………………….****Date received: / /20** |