Behaviour Complaint Form





Version 2.0 Version Date 25/11/2021 Governance GOV/53

Instructions for making a complaint about an alleged breach of the Shire of Augusta Margaret River Code of Conduct for Council Members, Committee members and Candidates

Behaviour Complaint

Please read the Shire's <u>Code of Conduct Behaviour Complaints Policy</u> on our website before submitting a complaint. This Policy details:

- How the Shire will process and determine a Behaviour Complaint; and
- How confidentiality of the complaint will be handled.

To make a valid **Behaviour Complaint**:

The allegation must relate to a breach of the behaviour standards in <u>Division 3</u> of the Shire's Code of Conduct for Council Members, Committee Members and Candidates.
Complete all sections of the Behaviour Complaint Form attached, including any additional information that will support assessment of the complaint. The Behaviour Complaints Officer may contact you to clarify or ask for more information.
The completed Behaviour Complaint Form MUST be lodged with the Shire's Behaviour Complaints Officer within one (1) month of the alleged behaviour breach.

Rules of Conduct Complaint

A **Rules of Conduct Complaint** refers to a breach of the Rules of Conduct outlined in <u>Division 4</u> of the Shire's Code of Conduct for Council Members and Candidates, including Council Members when acting as a Committee Member. This type of complaint is determined by the Local Government Standards Panel, administered through the Department of Local Government, Sport and Cultural Industries. Further information about Rules of Conduct Complaints may be obtained from:

- Department of Local Government, Sport and Cultural Industries: (08) 6552 7300 or www.dlgsc.wa.gov.au; OR
- The Shire's Rules of Conduct Complaints Officer: (08) 9780 5200 or amrshire@amrshire.wa.gov.au

BEHAVIOUR COMPLAINT FORM

Need Advice?

If you require advice in making a Behaviour Complaint, please contact the Shire's Behaviour Complaints Officer on:

Stephanie Addison-Brown
Chief Executive Officer
(08) 9780 5200
amrshire@amrshire.wa.gov.au

Behaviour Complaint Form



Shire of Augusta Margaret River Code of Conduct for Council Members, Committee Members and Candidates

	Name of Person Making the Complaint						
Complainant Name: Given Name/s and Family Name							
		C	ontac	t Details			
Res	sidential Address:						
Postal Address:							
Pho	one:	Day-time:			Mobile:		
Em	ail:						
		Co	mplai	nt Details:			
1.	1. Insert Name of Person alleged to have committed a behavior breach:						
2. Select the position that the person was fulfilling at the time the person committed the alleged behaviour breach:		Counc	Council Member of the Shire of Augusta Margaret River				
				Member of a Committee of the Shire of Augusta Margaret River			
			Candidate for election at the Shire of Augusta Margaret River				
3.	3. Date that the alleged behaviour breach occurred:						
4.	4. Location where the alleged behaviour breach occurred:						

5.	Which of the behavior requirements prescribed in Division 3 of the Shire's Code of Conduct do you allege this person has breached? (list the clauses)
6.	State the full details of the alleged breach.
7	List any additional information you have provided as part of this complaint: Please ensure all information relevant to the alleged breach has been attached. This information will be the basis on which the complaint is considered.

9			made any efforts to resolve the complaint with the Respondent e, you MUST complete this section	1?			
YE	If yes, please describe the efforts that you have made.						
NO			If no, please include a brief statement explaining why you have not made resolve the issue with the person complained about.	any efforts	to		
10	the par The issumill	opporto ties, wil e object ues and have a	hire of Augusta Margaret River has a policy that the Complainant and the Res portunity to participate in an Alternative Dispute Resolution process, that if ags, will be undertaken before the complaint is dealt with. Dispective is to support both parties to reach a mutually satisfactory outcome that and restores the relationship between them. An outcome may be that as the we absolute discretion to withdraw or continue with this Complaint.		reed to by BOTH t resolves the		
		ould yo	ou agree to participate in an Alternative Dispute Resolution	YES			
11	- 1	Please e	ed outcome of the Complaint explain what you would like to happen as a result of lodging this complaint, inity to participate in Alternative Dispute Resolution.	including th	ıe		

COMPLAINANT please	e sign and date			
Signature:				
Date:				
Please submit comple	ted Behaviour Complaint to:			
Γhe Shire of Augusta Mar	garet River Behaviour Complaints Officer:			
Stephanie Addisor	n-Brown			
Chief Executive Of	fficer			
Shire of Augusta Margaret River				
Email:	amrshire@amrshire.wa.gov.au			
Mailing Address:	PO Box 61			
	Margaret River 6285 WA			
In person:	41 Wallcliffe Road			
	Margaret River WA			
OFFICE USE ONLY: Re	eceived by the Council appointed Behaviour Complaints Officer			
Authorised Officer's Name:				

Authorised Officer's
Name:

Authorised Officer's
Signature:

Date received:

File reference:

GOV/53