

## **Harassment Free Workplace Policy**

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The Company is committed to providing a work environment that is free from harassment for all employees, applicants for employment, interns, whether paid or unpaid, contractors, clients, customers, guests, vendors and persons conducting business with the Company. Therefore, the Company will not tolerate harassment based on age, race, gender, color, religion, national origin, disability, marital status, covered veteran status, sexual orientation, status with respect to public assistance, and other characteristics protected under state, federal, or local law. Such conduct is prohibited in any form at the workplace, at work-related functions, or outside of work if it affects the workplace.

Sexual harassment, one type of prohibited harassment, warrants special mention. Sexual harassment is a form of employee misconduct. Sanctions will be enforced against those who engage in sexual harassment and against Supervisors who knowingly allow such behavior to continue. Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitutes sexual harassment when:

1. Submission to such conduct is made a term or condition, either explicitly or implicitly, of an individual's employment;
2. Submission to or rejection of such conduct by an individual is used as a factor in decisions affecting that individual's employment; or
3. Such conduct has the purpose or effect of interfering with an individual's work performance or creates an intimidating, hostile, or offensive working environment.

Examples of conduct prohibited by this policy include, but are not limited to:

- Unwelcome sexual flirtation, advances, or propositions, innuendo, suggestive comments, sexually oriented jokes or teasing;
- Unwelcomes physical conduct such as patting, pinching, or brushing against another;
- Verbal comments related to an individual's age, race, gender, color, religion, national origin, disability, or sexual orientation;
- Explicit or degrading verbal comments about another individual or his/her appearance;
- The display of sexually suggestive pictures or objects in any workplace location including transmission or display via computer;
- Any sexually offensive or abusive physical conduct;
- The taking of or the refusal to take any personnel action based on an employee's submission to or rejection of sexual overtures; and
- Displaying cartoons or telling jokes which relate to an individual's age, race, gender, color, religion, national origin, disability, or sexual orientation.

## **Harassment Free Workplace Policy cont.**

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### **Complaint Procedure:**

If you believe that you are being subject to workplace harassment/sexual harassment, you should:

1. Tell the harasser that his or her actions are not welcome and they must stop, if you feel comfortable enough to do so.
2. Report the incident immediately to your supervisor/manager or the Human Resources Department. Reports of sexual harassment may be made verbally or in writing. A form for submission of a written complaint is attached to this policy, and all employees are encouraged to use this complaint form.
3. Report any additional incidents or retaliation that may occur to one of the above resources.

Managers and Supervisors are required to report any complaint that they receive, or any harassment that they observe and immediately review the allegations. Complaints and actions taken to resolve complaints will be handled as confidentially as possible and should be completed within a reasonable timeframe. Appropriate actions will be taken by the Company to stop and remedy any and all such conduct, including interim measures during a period of investigation. If documents, emails or phone records are relevant to the allegations, the company will take steps to obtain and preserve them and will create written documentation of the investigation that includes key information.

Retaliation of any kind or discriminating against an employee who reports harassment/sexual harassment or who testifies or assists in related proceedings is prohibited. There will be no adverse action taken against those who report violations of this policy in good faith, or for those that participate in the investigations of such violations. An employee who violated this policy or retaliated against an employee in any way will be subject to disciplinary action up to and including immediate termination.

Sexual Harassment is not only prohibited by the Company, but is also prohibited by state, federal, and, where applicable, local law. Employees have a right to file an external complaint or charge by choosing to pursue legal remedies with the following governmental entities at any time:

#### **New York State Division of Human Rights (DHR)**

One Fordham Plaza, Fourth Floor, Bronx, NY 10458, 718.741.8400, [www.dhr.ny.gov](http://www.dhr.ny.gov)

Contact DHR at 888.392.3644 or visit [dhr.ny.gov/complaint](http://dhr.ny.gov/complaint) for more information on filing complaint.

#### **United States Equal Employment Opportunity Commission (EEOC)**

1.800.669.4000 (1.800.669.6820 TTY), [www.eeoc.gov](http://www.eeoc.gov) or email at [info@eeoc.gov](mailto:info@eeoc.gov).

#### **Local Protections/Local Police Department**

An employee should contact the county, city, or town in which they live to find out if such a law exists. If the harassment involves physical touching, coerced physical confinement or coerced sex acts, the conduct may constitute a crime.



**United States**  
400 Exchange Street  
Buffalo, NY 14204  
Phone: 1.800.669.1535  
Fax: 1.800.347.2420

## **Harassment Free Workplace Policy Acknowledgement**

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By signing this document, I acknowledge that I have read and understand, and will comply with this policy. I also understand that failure to comply with company policy may result in disciplinary action, up to and including termination.

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Employee Signature

Printed Name

Date

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Human Resources Signature

Printed Name

Date



**United States**  
400 Exchange Street  
Buffalo, NY 14204  
Phone: 1.800.669.1535  
Fax: 1.800.347.2420

## Harassment Complaint Form

Name of the Complainant:

Department:

Phone Number:

E-mail:

Today's Date:

Name of the Accused:

Department:

Relationship of the Accused to the Complainant (manager, co-worker, client, etc.): Co-Worker

Phone Number:

E-mail:

**Date of Incident:**

**Where did the specific event occur?**

**Please explain the events that occurred.**

**How did you react to the situation? Did you take any action to stop perceived inappropriate behavior?**

**Describe the harm you have suffered as a result of the event.**

**Were there any witnesses to this specific event? (If yes, please provide their names.)**

**Is there any physical evidence that supports your complaint? If so, please describe or attach copy of evidence.**

**What is your desired outcome of the investigation?**

*The information provided in this complaint is true and correct to the best of my knowledge. I am willing to cooperate fully in the investigation of my complaint and provide whatever evidence Graphic Controls deems relevant.*

Signature \_\_\_\_\_

Date: \_\_\_\_\_

*\*Please return this form to Human Resources.*