



WOKINGHAM BOROUGH COUNCIL

Members Code of Conduct Complaint Form

If you have any questions or difficulties filling in this form or you are in need of any support in completing this form, if for example English is not your first language, or you have a disability that prevents you making your complaint in writing please contact the Monitoring Officer. The Monitoring Officer's contact information can be found at the end of this form.

Please note

- a) Please read “**Guidance notes on making a complaint about a Councillor**” leaflet prior to completing this form.
- b) Complaints can only be accepted in writing
- c) An officer from the Council may contact you personally to go through the details of your complaint.
- d) The Council is unlikely to be able to keep your identity or the information you have provided confidential. If you have serious concerns about disclosure of your name and details, please complete Section 3.

SECTION 1:	YOUR CONTACT DETAILS
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Please clearly set out your details

Title:	
Full Name :	
Address including postcode:	
Telephone:	
Mobile:	
E-mail address:	
Preferred method of contact:	<input type="checkbox"/> by post <input type="checkbox"/> by email

Please tick the box which best describes who you are:

- Member of Public
- Councillor or Parish Councillor of the Council
- Local Authority Officer/Employee
- Other (Please specify)

Informal resolution

Would you be happy for the Monitoring Officer to attempt to resolve your complaint informally, or do you want the matter dealt with through the formal complaints process? Please note that if your complaint is resolved informally there is no possibility of the matter being investigated.

Yes

No

If yes, what type of action would satisfy you? For example, an apology from the Councillor concerned.

SECTION 2:	YOUR COMPLAINT
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1. Who are you complaining about?

Please give the name of the Councillor(s) you believe has breached the Code of Conduct:

Title	First Name	Last Name	Name of their Authority/Council

2. What are you complaining about?

Please provide us with as much information as you can about your complaint to help us decide whether or not it should be investigated. Include the date and details of the alleged misconduct and any information that supports the allegation. If you are complaining about more than one councillor, you should clearly explain what each individual councillor has done that makes you believe that they have breached the Code of Conduct.

We can only investigate complaints that a councillor has broken the Code of Conduct for councillors. (please see leaflet "**How to make a complaint**" referred to above). We cannot consider general complaints about Council services or against Council Officers.

Details of complaint

Please set out why you believe the Councillor you are complaining about has breached the Code of Conduct.

You can continue on a separate sheet if there is not enough space on this form.

SECTION 3:	CONFIDENTIAL COMPLAINTS
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Only complete this part if you are requesting that your identity is kept confidential. For further information please refer to “How to make a complaint” leaflet.

If you are requesting your details to be kept confidential please provide details of why you believe we should withhold your name/details below:

Please answer:

I confirm that if I have requested confidentiality, but if my request is not granted, I am happy for the complaint to proceed.

- Yes - I agree.
- No, - I don't agree

Please note that if you do not tick this box and confidentiality is not granted, your complaint will not be proceeded with unless it is considered to be of a serious nature.

SECTION 4:	DECLARATION
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I confirm that I would like the Monitoring Officer to consider the complaint I have described above with the evidence I have attached.

I understand and accept that the details will normally be disclosed to the Councillor that I have complained of and any parties involved in the complaints procedure or outside authorities required to monitor the council's complaints procedure by law. If your complaint relates to a parish or town council member then the Parish Clerk will be advised.

I confirm that Wokingham Borough Council may share this information where necessary with other organisations, including (but not limited to) where it is appropriate to protect public funds and/or prevent fraud in line with the National Fraud Initiative guidelines.

Signature:

Name Printed: _____ Date: _____

Please send this form together with any attachments to:-

The Monitoring Officer, c/o Democratic Services, Wokingham Borough Council, Civic Offices, Shute End, Wokingham, RG40 1BN

Or by e-mail to: democratic.services@wokingham.gov.uk



WOKINGHAM BOROUGH COUNCIL

EQUALITIES MONITORING INFORMATION (optional)

The completion of this form or any part of it is voluntary.

Wokingham Borough Council is committed to providing people with equal opportunities in the provision of services. We want to collect information about people so that we can tailor our services to meet their needs and also make sure that we are not doing anything that stops some people who fit into certain groups from having accessing our services.

We would be grateful if you would help us by completing the monitoring information on this form. Any personal information you give us is held securely and will be used only for council purposes. Information that was collected for one purpose may be used for another council purpose, unless there are legal restrictions preventing this.

Please mark "X in the appropriate box

Q.1 What is your gender?

Male	
Female	
Transgender	
Prefer not to say	

Q.2 What is your age group?

Under 15		55-64	
16-24		65-74	
25-34		75-84	
35-44		85 +	
45-54		Prefer not to say	

Q.3 Do you have any long-term illness, health problem or disability which limits what you can do?

Yes

No

Prefer not to say

Q.4 What is your ethnic background? Please tick one box only.

White	Mixed	Asian & Asian British
White British	White & Black Caribbean	Indian
White Irish	White and Black Asian	Pakistani
Other White (please state)	White and Asian	Bangladeshi
	Other mixed (please state)	Other Asian background (please state)
Black or Black British	Gypsy/Traveller	Chinese or other ethnic group
Caribbean	Romany Gypsy	Chinese
African	Irish Traveller	Other ethnic background (please state)
Other Black background (please state)	Other (please state)	

Q.5 What is your religion? Please tick one box only.

Christian		Muslim	
Buddhist		Sikh	
Hindu		No religion	
Jewish		Other (please state)	

Q.6 Which of the following best describes you?

Heterosexual		Lesbian	
Bisexual		Prefer not to say	
Gay			