

## **AMS Elections Complaint Form**

Hello! Welcome to the AMS Election Candidate Complaint Form. The purpose of the enclosed document is for current elections candidates in AMS elections to launch a formal complaint against another team also running in the election. Please include as much information as possible and reference AMS policy where applicable. The name of the complainant and respondent is necessary for the case to be processed. Please note that all complaints will be kept confidential and will only be shared with members of the Elections Team. Please send this form to [disputes\\_deputy@ams.queensu.ca](mailto:disputes_deputy@ams.queensu.ca)

### **Contact information**

Your name:

Your email:

Your phone number:

If applicable, please provide the team/group with which you are affiliated:

What is your role within said Team/Group (i.e., campaign manager, candidate etc.):

### **Complaint Details**

Date of Incident:

Time:

Location of Incident

Who/What is the subject of your complaint:

In as much detail as possible, please explain the incidence pertaining to the complaint:

If applicable, please include the specific section of AMS policy you believe was violated:

If applicable, please attach any images pertaining to your complaint. (optional):

### **Complaint Outcome**

As a result of making this complaint, is there any outcome you would like?

- Yes
- No
- Unsure

If yes, please explain what action you would like to see taken by the Elections Team: