**VIOLENCE IN THE WORKPLACE POLICY**

**VIOLENCE-FREE WORKPLACE**

[EMPLOYER'S NAME] has a zero-tolerance policy for workplace violence. This includes any violent actions or threats made by employees, supervisors, or third parties such as [vendors, clients, customers, or visitors]. This policy applies to all incidents occurring [on company premises or during employer-sponsored events].

This policy is designed to comply with all applicable laws and regulations in the state of Iowa, ensuring adherence to state-specific requirements.

**EXAMPLES OF PROHIBITED CONDUCT**

For the purposes of this policy, workplace violence includes, but is not limited to, the following behaviors:

* Threatening remarks: Making written or verbal threats.
* Aggressive actions: Engaging in shouting, profanity, throwing objects, fighting, or intentionally damaging a coworker’s property.
* Bullying or intimidation: Harassing others through actions such as obscene phone calls or threatening gestures, like standing uncomfortably close or shaking a fist at someone.
* Emotional harm or fear: Engaging in behaviors like stalking, which cause emotional distress or create reasonable fear of injury.
* Physical assault: Committing acts of physical violence against another person.
* [Additional Examples]: [Insert other specific forms of prohibited conduct relevant to your workplace].

This list is not exhaustive. Any form of workplace violence is strictly prohibited and will not be tolerated under any circumstances.

**PROHIBITED WEAPONS POLICY**

[EMPLOYER'S NAME] strictly prohibits employees—except for [POSITION TITLE]—from possessing weapons of any kind while at the workplace[, participating in work-related activities, or attending employer-sponsored events]. For the purposes of this policy, the workplace includes [EMPLOYER'S NAME]'s building[s], outdoor areas, and parking lots.

Weapons are defined to include, but are not limited to:

* Guns.
* Knives.
* Mace.
* Explosives.
* Items with no common purpose that could inflict harm.
* [Additional examples relevant to your workplace.]

This list is illustrative and not exhaustive. Employees are prohibited from bringing any weapons onto [EMPLOYER'S NAME] premises under any circumstances.

**REPORTING WORKPLACE VIOLENCE**

[EMPLOYER'S NAME] is dedicated to upholding this policy and addressing all forms of workplace violence. The success of these efforts relies on employees promptly reporting any incidents of workplace violence, including threats.

Employees who witness or are subjected to workplace violence must report the incident immediately [using the complaint procedure outlined below]. If employees fail to report such incidents, [EMPLOYER'S NAME] may remain unaware of the violation and be unable to take corrective action.

**REPORTING AND COMPLAINT PROCEDURE**

If you witness or experience conduct that violates this policy, you must report it as soon as possible by speaking with, writing to, or contacting your direct supervisor. If the conduct involves your direct supervisor, you should escalate the matter to [the next level above your supervisor/[DEPARTMENT NAME]].

Your complaint should include as much detail as possible, such as the names of those involved and any witnesses. [For convenience, a workplace violence complaint form is available at [LOCATION DESCRIPTION].]

[EMPLOYER'S NAME] will thoroughly investigate all reported incidents of workplace violence and take immediate corrective action, which may include discipline or termination of employment. [If necessary, [EMPLOYER'S NAME] may contact law enforcement or seek a restraining order to protect employees from workplace violence, as permitted by law.]

If you are aware of an imminent violent act or threat, immediately contact law enforcement, followed by [EMPLOYER'S NAME]'s [security team/[DEPARTMENT NAME]].

**POLICY ADMINISTRATION**

The [DEPARTMENT NAME] Department is responsible for overseeing and enforcing this policy. For any questions or concerns about workplace violence that are not addressed here, please contact the [DEPARTMENT NAME] Department directly.

**NO RETALIATION POLICY**

[EMPLOYER'S NAME] strictly prohibits any form of discipline, reprisal, intimidation, or retaliation against employees for reporting workplace violence, filing a workplace violence complaint, or cooperating in an investigation related to such incidents.

**APPLICABILITY TO COLLECTIVE BARGAINING AGREEMENTS**

The terms of this policy complement, but do not replace, modify, or add to, the employment terms outlined in any collective bargaining agreement (CBA) between a union and [EMPLOYER'S NAME].

Employees are encouraged to consult their collective bargaining agreement. In instances where the terms of this policy conflict with those in the applicable CBA, the terms of the CBA will prevail.

**ACKNOWLEDGEMENT OF RECEIPT AND REVIEW**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (employee name), acknowledge that on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date), I received and reviewed a copy of [EMPLOYER'S NAME]’s [NAME OF POLICY]. I understand that it is my responsibility to familiarize myself with the policy and adhere to its terms.

I also acknowledge that this policy is not intended to create an employment contract or alter my at-will employment status, unless otherwise specified in a written agreement signed by an authorized representative of [EMPLOYER'S NAME]. Any delay or failure by [EMPLOYER'S NAME] to enforce the provisions of this policy does not constitute a waiver of its rights to enforce them in the future.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date