



LUCY LANG
Inspector General

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DOMESTIC VIOLENCE IN THE WORKPLACE POLICY AGENCY SURVEY

Agency:

Name of Person Completing Survey:

Title of Person Completing Survey:

Email of Person Completing Survey:

- (1) Does your agency presently have a Domestic Violence in the Workplace Policy?
- (2) Have you provided a copy of that Domestic Violence in the Workplace Policy to the Office for the Prevention of Domestic Violence (OPDV)?
- (3) What steps has your agency taken to disseminate information about your Domestic Violence in the Workplace Policy to agency employees?
- (4) Does your agency have a designated OPDV Liaison?
 - a. If yes, what is the name of your agency liaison:
 - b. If yes, what is the job title of your agency liaison:
 - c. If yes, has your agency liaison received training from OPDV:
 - d. If yes, what steps have been taken to disseminate the identity to agency employees:
- (5) Does your agency offer any annual training regarding the prevention of domestic violence?
 - a. If yes, what?
- (6) Please upload a copy of your Domestic Violence in the Workplace Policy by clicking **[HERE](#)**