



## SHe-Box

- Sexual harassment complaints portal



# SHE-BOX



## National Informatics Centre Ministry of Electronics & Information Technology Government of India

She-Box- Complainant (Central Govt.) User Manual

# **User Manual**



महिला एवं बाल विकास मंत्रालय **MINISTRY OF** WOMEN AND **CHILD DEVELOPMENT** 

सत्यमेव जयते





### 1. SHe-Box portal

\* Accessing the SHe-Box Portal

			MINIST	<b>RY OF WOMEN</b> Governm	& CHILD DEV ent of India	ELOPMENT				0
HOME ABOUT US	LEGAL PROVISION	RESOURCES & TRAINING	LC 🔻	PHOTO GALLERY	WHATSNEW	CONTACT US				
SHe-Box Online Comp	laint Manage	ment System					Q	Register your Con	splaint	
IF YOU ARE FACING SEXUAL HARASSMENT AT WORKPLACE										
private or public sector, to facili portal. Once a complaint is submi	tate the registration of compilal Itted to the 'SHe-Box', it will be d	int related to sexual harassment. A lirectly sent to the concerned autho	viy woman facin ority having jurise	g sexual harassment at wi diction to take action into f	orkplace can register th the matter.	eir complaint through ti				
Statistics										
75		136		75		2	(	)	3	

#### i. Enter the URL: https://shebox.wcd.gov.in/

In the address bar at the top of your browser, type in the following URL: [https://shebox.wcd.gov.in/]

### 2. Registering a Complaint

MINISTRY OF WOMEN & CHILD DEVELOPMENT Government of India										
HOME ABOUT US	LEGAL PROVISION	RESOURCES & TRAINING	LC 🔹	PHOTO GALLERY	WHATS NEW	CONTACT US				
SHe-Box Online Complaint Management System IFYOU ARE FACING SEXUAL HARASSMENT AT WORKPLACE Sugai Hanzament devetwick bas (SNe-Bod Is an effort of Coll Synthesia and and socies to every woman, Irregetives of ner work status, whether working in organized or unorganized to unorganized or unorganized programmed at the effort of Coll Synthesia and and the every woman, Irregetives of the work status, whether working in organized or unorganized to unorganized or unorganized to unorganized to unorganized to unorganized to unorganized to the socies to advantation of complaint related to be social bransament of works status, whether working in organized or unorganized to unorganized to unorganized to unorganized to unorganized to the socie status of the socie status and the socie status of the socie status and the socie status of the socie stat										
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#### i. Navigate to the Complaint Registration Section On the SHe-Box Portal homepage, locate and click on the "Register Your Complaint" button.





#### ii. Complete the Complaint Form

Follow the on-screen instructions to fill out the required information in the complaint form.

#### iii. Submit Your Complaint

Review the information you've provided, then click the "Submit" button to register your complaint.

Complainant / Complaint	۲
Register Complaint	<b>F</b> View Status
<ul> <li>Choose Register Complaint.</li> </ul>	Close



**Choose Central Government**, from the available options, select "Central Government" for further action.

#### <u>Step-1:</u>





	CENTRAL GOVERNMENT	
	Step 1/4 - Complainant Details	
* Complainant Behalf? Self O Any Other		
* Complainant Work Status		
a * Name of the Complainant	Mobile Number	Email ID
Next		

#### ✓ Fill in All Mandatory Details

Ensure all mandatory fields are completed. Once all required information is filled in, click the "Next" button to proceed.

If someone else is registering the complaint on behalf of the complainant: Ensure the following details are updated:

#### If the complainant's work status is "Working"-

Choose the appropriate "Nature of Engagement" from the options provided.

* Complainant Behalf?	er	Nature Of Engagement
* Complainant Work Status	Nature Of Engagement	Regular employee Temporary/ contractual staff/ ad hoc / daily wager Hired directly or through an agent/ contractor
Working Visiting a Workplace Student Next	Mobile Number	On remuneration/ voluntary basis Student in any educational institution/ any academy or organization Probationer/ trainee/ intern Visitor to office
		Domestic worker

#### <u>Step-2:</u>

#### ✓ Select Ministry and Department

From the list provided, select the relevant Ministry and Department. Ensure all other required details are filled in to proceed to the next step.

Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment occured  Step 2/4-Details of workplace where the incident of sexual harassment o		CENT	RAL GOVERNMENT
*Select Ministry     *Select Operationent       *Select State     *Select Operationent       *Select State     *Select Operationent       *Net of operation     *Net operation		Step 2/4 -Details of workpla	ce where the incident of sexual harassment occured
* Select State       P       NCT Of Delhi       Nott       Dack	童 * Select Ministry	ment	
Niet Dat	*select State ♥ NCT Of Delhi	x HI	
	Next Back		





#### <u>Step-3:</u>

#### ✓ Fill in All Mandatory Details

Ensure all mandatory fields are completed. Once all required information is filled in, click the "Next" button to proceed.

Name of Respondent		Designation		🛎 Email ID	Mobile No.	
₩ Working relationship of Respondent with complai	nant					
Are the details of workplace of the respondent same	as that of	the workplace where the incident of sexual harassm	ent occured	? OYes No		
🏛 * Select Ministry		m * Select Department				
Select State V NCT Of Delhi		Select District           V           New Delhi				
Is there more than one Respondent? OYes .	No					

#### ✓ <u>Step-4:</u>

#### Fill in All Mandatory Details

Ensure all mandatory fields are completed.

#### Click on 'Register'

Review all entered information, and then click the "Register" button to file the complaint.

CENTRAL GOVERNMENT				
	Step 4/4 - Complaint Details			
* Have you already registered complaint with IC ? ○Yes ● No				
Brief description of the incident with relevant facts (Max 500 words)				
Please Upload Supporting Document (PDF.JPEG.PNG Only) If any	Choose File   No file chosen Max file size is 2 MB			
□ I have read and agree to the terms and conditions.				
l 4 T <sup>5</sup> 4 C C	Inter Captcha here			
Register Back				

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