



WHISTLEBLOWING POLICY COMPLAINT/DISCLOSURE FORM

STRICTLY CONFIDENTIAL



COMPLAINT/DISCLOSURE FORM

NOTE: PLEASE PROVIDE DETAILED INFORMATION AS MUCH AS POSSIBLE

COMPLAINANT'S INFORMATION				
NAME:		OFFICE ADDRESS:		
SIGNATURE / DATE	EMPLOYEE NO.	E-MAIL ADDRESS:		
COMPANY/DEPARTMENT	DESIGNATION	PHONE NO.	MOBILE NO.	FAX NO.
INFORMATION CONCERNING THE COMPLAINT				
What is the major issue involved? <input type="checkbox"/> Violations of Corporate Governance Rules <input type="checkbox"/> Financial and Procedural Malpractice <input type="checkbox"/> Violations of the Code of Discipline <input type="checkbox"/> Others (Please specify)				
What happened? (Please attach additional sheet(s) if necessary)				
How did you know about the subject of the complaint(s)?		Please indicate the physical evidences/ documentations that may support your disclosure.		
<input type="checkbox"/> Personal or direct knowledge <input type="checkbox"/> Others have told me about it <input type="checkbox"/> Others (Please specify)		Documents attached:		No. of Pages
		1.		
		2.		
		3.		
Who is/are the person(s) involved? (Respondent/s) (Please attach additional sheets if necessary)				
NAME	DESIGNATION	COMPANY	DIVISION/GROUP/DEPT.	NATURE OF INVOLVEMENT
Who is/are the possible Witness(es)? (Please attach additional sheets if necessary)				
NAME	DESIGNATION	COMPANY	DIVISION/GROUP/DEPT.	NATURE OF INVOLVEMENT
When did the incident take place? Date/Time/Frequency				
Since when has this been occurring?		Location of evidence:		
How much is involved? Please provide an approximate figure.				
Why are you making this disclosure? (Please attach additional sheet if necessary)				
DISCLOSURE HISTORY		PLEASE ADVISE ON HOW WE MAY CONTACT YOU		
Was the disclosure previously reported to a management level? If yes, to whom was it reported?		<input type="checkbox"/> BY PHONE <input type="checkbox"/> THROUGH E-MAIL <input type="checkbox"/> OTHERS (SPECIFY)		
What do you think was the reason for lack of immediate action?				