Whistleblower Report

Report date:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | |  | | |
| Affiliation | |  | | |
| Preferred Contact Method(s) and Details | | Telephone |  | （　　　　　　　　　　　　　　　　　　　　　　） |
| E-mail |  | （　　　　　　　　　　　　　　　　　　　　　　） |
| Internal Mail |  | （　　　　　　　　　　　　　　　　　　　　　　） |
| Report Details | Subject of the Report (Name and Department) |  | | |
| Matters to Report |  | | |
| Special Notes |  | | |
| Is evidence available? | | Yes / No | | (If yes, provide details: ) |
| Do you wish to be notified of results? | | Yes / No | | |

\*Please provide your real name and preferred contact method(s) and details wherever possible. If you report anonymously, it may be difficult to conduct a full investigation into the case.

\*Your name and other personal information will be protected appropriately and used solely to the minimum extent necessary for the purposes of contacting you from contact points, investigating and processing this report.

\*In the Report Details section, please enter whatever you know about the matter you are reporting, such as when, where, how, for what reason it occurred or is about to occur, and what laws or regulations it infringes.

\*“Evidence” includes not only documents, but also electronic and magnetic recording media and any other items that may furnish evidence of the matters you are reporting. Please submit such evidence when lodging your report.