



## Safe Disclosure “Whistleblowing” Form

### Discloser’s Details

Name:	Employee #:
Position:	Campus/Department:
Work Phone:	Other Phone (optional):
Email (work or personal per contact preference):	
Best Time to Call:	
Preferred method of Contact (i.e. cell phone, e mail):	

### Details about Respondent (Subject(s) of Complaint)

Name:	Position:
Campus/Department:	Work Phone:
Name:	Position:
Campus/Department:	Work Phone:

### Details about Witnesses

Name:	Position:
Campus/Department:	
Name:	Position:
Campus/Department:	

The NSCC Safe Disclosure (Whistleblower) Policy and procedures should be read prior to completing this form.

Briefly describe the information the witness(es) are able to confirm.

When making a disclosure, it is important to provide as much information as possible for each allegation being made. This form requests information that is relevant and necessary to assist with the review to determine whether and how to conduct an investigation. While you may not have all the information, the Safe Disclosure form requests you to consider:

- **Who?**  
Who is responsible for the Improper Activity? If anyone outside of the College is involved and known to you, who are they? If any businesses are involved, which ones? Who else is involved or who knows about this?
- **What?**  
What is the Improper Activity? What documents are there that might verify the Improper Activity occurred? Can you provide copies of the documents?
- **Where?**  
Where did the Improper Activity occur? Where can an investigator find documents or other evidence related to the activity?
- **When?**  
When did the activity occur? When did you discover the activity?
- **Why?**  
Did the activity provide some benefit to those involved?
- **How?**  
How was the activity able to occur? Were there any controls in place and if so, how were they evaded?

## Disclosure

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Briefly describe the Improper Activity and how you know about it. Where possible, specify who, what when, where and how. If there is more than one allegation, number the allegations and provide details regarding each.

## Evidence

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Please list all documents or other items that you know of, and where they may be found, regarding the Improper Activity and explain how each item provides proof. If you have any of the items listed in your possession, please provide copies.

I confirm that the information provided in this Form, and in any supporting information submitted, are true and correct to the best of my knowledge and belief. I agree to cooperate in any investigation and will comply with the confidentiality requirements outlined in the Policy and Procedures.

## Signature

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\_\_\_\_\_  
Disclosure Signature

\_\_\_\_\_  
Date

### Confidentiality

Any disclosure will be acted upon with due regard to confidentiality for all parties concerned insofar as such confidentiality does not interfere with the legal obligations of the College and the obligation of the College to investigate allegations of misconduct and to take corrective action. Throughout the process, the Discloser, Respondent (Individual accused of Improper Activity) and witnesses will be dealt with in a sensitive and respectful manner.