



CEKAP TECHNICAL SERVICES SDN BHD WHISTLEBLOWING REPORT FORM

STRICTLY CONFIDENTIAL

This whistleblowing form is for you to report any suspected serious misconduct or breach of law or regulation that may adversely impact Cekap Technical Services. Please fill the form with as much information as possible. Please note that you may be called upon to assist investigations.

(*) Denotes mandatory field

YOUR CONTACT INFORMATION*

Name*				
NRIC No.*				
Contact No. *				
Email address*				
Are you an employee of Cekap Technical Services?*	Yes		No	
If your answer is "No", state the organization you are from:				

DETAILS OF THE SUSPECT* (please fill in as much information as possible)

Name:
Position:
Department/Company:
Contact Number:
Email address:
<u>COMPLAINT:</u> <ul style="list-style-type: none">• Briefly describe the misconduct / improper activity / what are the allegation and how you know about it.• When and where the alleged improper conduct took place and how. If there is more than one allegation, number each allegation and use additional sheets, if necessary.



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DOCUMENTS*:

- *To facilitate investigation, please state (if any) supporting documents, witnesses or evidence to substantiate your disclosure*
- *You may also attach the relevant documents and use additional sheets, if necessary.*

DECLARATION*

I hereby declare that all the information given herein are made voluntarily and are true to the best of my knowledge and I will ensure that my participation in this matter will be kept confidential. I do understand that CEKAP will use the information and material provided throughout the investigation process. By signing this declaration, your identity shall be protected by Cekap."

Signature:

Name:

Date: