



## ALAM MARITIM GROUP

## WHISTLEBLOWING FORM

a. Name : b Designation :  2 DISCLOSURE DETAILS 2.1 PARTY INVOLVED IN CONCERN RAISED (You may insert information on additional individuals involved in a separate sheet) a. Name of Party b. Designation c. BU/Dept How do you know this party? d  3 DETAILS OF CONCERN (You may use additional sheets if necessary) a. Date / Time / Location b. Description of Concern  5 SUPPORTING INCORMATION TO ASSIST INVESTIGATIONS (Please attach supporting evidence to substantiate your disclosure and assist in investigation. You may use additional sheets for additional witnesses or supporting evidence if necessary)  a. Witness Name Dept b. Supporting Evidence 5 REPORTING TO OTHER PARTIES a. Have you raised your concern to any other person / department / authority? (Tick whichever applicable)  If yes, please state the person/department/authority the report was made/lodged and insert the date of the report. You may attach a copy of the report made.  6 PARTICULARS OF WHISTLEBLOWER a. Name Name Name Name Name Name Name Name				REFERENCE NUMBER:	
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