

WHISTLEBLOWER REPORT FORM

Please provide the following details for any suspected serious misconduct or any breach or suspected breach of law or regulation that may adversely impact the Company. Please note that you may be called upon to assist in the investigation, if required.

**Compulsory fields*

REPORTER'S CONTACT INFORMATION (This section may be left blank if the reporter wish to remain anonymous)	
Name *	
Designation	
Department	
Contact Number	
E-Mail Address *	
SUSPECT'S INFORMATION	
Name *	
Designation	
Department	
Contact Number	
E-Mail Address	
WITNESSES'S INFORMATION (if any)	
Name	
Designation	
Department	
Contact Number	
E-Mail Address	
DISCLOSURE	
<ul style="list-style-type: none"> - Please include (i) background and history of concern (What, Who, When, Where, How) and (ii) evidence (if any) to support the claim. - Insufficient details in the whistleblowing report may delay the investigation and outcome of the concerns raised. 	
I hereby declare that all the information given herein are made voluntarily and true to the best of my knowledge. Institut Jantung Negara (IJN) Sdn. Bhd. will use the information and material(s) provided in the course of managing the disclosure/complaint.	
Date:	Signature:

Notes:

- Complaints from Whistleblower who uses someone else's identity (Name, NRIC, Staff ID, Contact Number, Email Address) will not be entertained and if committed by IJN's staff, will be subjected to disciplinary action.
- Please fill up the form and email to IGUnit@ijn.com.my OR mail to Audit, Risk and Compliance Department, Institut Jantung Negara, 145 Jalan Tun Razak, 50400 Kuala Lumpur.

Effective date: 1st October 2020