



Syntrino Solutions Sdn Bhd (1149174-D)

The Vertical Business Suite, Tower B, Level 17 Unit 06 (17-06),
 Jalan Kerinchi, Bangsar South, 59200 Kuala Lumpur, Malaysia.

Tel: +603 2242 1297 Fax: +603 2242 1297

GST Reg. No: 000428257280

WHISTLE-BLOWER REPORT FORM

A. WHISTLEBLOWER'S INFORMATION

Name: :
 NRIC/Passport No: :
 Employee No: :
 Designation/Occupation: :
 Contact No: :
 Email address: :
 Relationship with Syntrino: :
(if not an Employee) :

B. WHISTLEBLOWING DETAILS INFORMATION

(Briefly describe the suspected misconduct/irregularities. Be specific on what, who, where and how you know about it. If there is more than one (1) allegation, please number each allegation and use as many pages as required.)

Name of the suspected wrongdoer/employee :

Department of suspected wrongdoer/employee :

What improper conduct occurred? :

Who committed the improper conduct? :

When did it happen and when did you become aware of it? :

Where did it take place? :

Is there any evidence to support your claim? *(Please attach supporting evidence/documentation to substantiate your disclosure and to assist the inquiry)* :

Are there any other individuals or parties involved than the suspect(s) named above? :

Do you have any additional details or information that you believe would help with the investigation? :



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C. WITNESS'S INFORMATION (If any)	
Name	:
Designation/Occupation:	:
Contact No.	:
E-mail Address	:
D. DECLARATION	
I have read and understood the Whistleblowing Policy and Procedures. I affirm that all information submitted in this Form is true and accurate to the best of my knowledge and agree to extend my full cooperation to Syntrino in their investigation of my report/complaint.	
.....	
Name:	
Date:	