

Ethics & Whistleblower Disclosure Form

Allows confidential reporting of ethical or compliance concerns.

01 Reporter Information (Optional)

Reporter Name

Employee ID

Department

Contact Info

Submit Anonymously?

02 Incident Details

Incident Date

Incident Location

Incident Category

Incident Description

Persons Involved

03 Supporting Information

Evidence Available?

Previously Reported?

Witness Names

Previous Report Reference

04 Follow-up

Preferred Contact Method

Urgency Level

Additional Notes

Declaration & Consent

I submit this disclosure in good faith, believing the information provided is accurate to the best of my knowledge. I understand that Humii prohibits retaliation against anyone who makes a report in good faith. This report will be treated with the utmost confidentiality and investigated in accordance with company policy. All data will be handled in accordance with Humii's Privacy Policy.

Authorized Signature

Date (DD/MM/YYYY)

Full Name (Print)

Designation