

WHISTLE BLOWING FORM

Complainant Details:

Name: _____ Complainant Type: _____ Employees

Address: _____ _____ Officers

Email Address: _____ _____ Customers

_____ Members/Cooperatives

_____ Others, please specify

Complaint Details:

Complaint Type: _____ Injustice _____ Faulty Customer Service

_____ Misbehavior

_____ Involvement in illegal Activities

_____ Harassment

_____ Causing loss to the Bank's Assets

_____ Financial Indiscipline

_____ Others, please specify

Incident Frequency: _____ Once/ _____ Twice/ _____ Repeatedly

Suspected Bank Official's Name: _____

Suspected Bank Official's Designation: _____