## Appendix A - Whistle-Blower Disclosure Statement

Personal Information:	
Name:	Email Address:
Campus Extension:	
Are you requesting confidentiality?	
Incident Information:	
Description of the alleged violation additional sheets as necessary):	(please be as specific as possible, including dates, and attach
Name of suspected employee(s):	
Witness(es):	
Do you have any evidence supporti	ng the allegation? Yes / No If yes, briefly describe:
Certification:	
I have read and understand the Ω outlined above are true and accurate	Daemen College Whistle-Blower Policy. I represent that the facts e to the best of my knowledge.
Signature	Date
	received by the Compliance Officer on the date noted below, and I d above
Signature	Date