



Report under whistle Blowing Policy

Date: _____ (DD/MM/YYYY)

Name: _____

Employee #: _____

Branch: _____

Do you wish to disclose your identity? Yes No

Nature of Complaint: _____

Description of complaint: _____

Person(s) involved: _____

Happening since: _____

In the knowledge of: _____

What records should be accessed: _____

Who should we talk to? _____

Matter already reported to: _____

Name of person to be contacted in case of investigation: _____

Impact on Bank: Reputational Loss Customer Complaint Financial Loss

Estimate of loss (In case if Financial): _____

Reasons of your suspicion: _____

Signature of the Complainant