



**CONFIDENTIAL**

FOR OFFICE USE	
Date :	
Ref No.:	
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## PETRONAS Whistleblowing Form

(\*) Denotes mandatory field

### 1 Your Contact Information \*:

Name \*

NRIC Number \*

Staff ID (for employees only) \*

Phone Number \* Office  Mobile  Home

Email Address \*

Employment Details \*  
Position, Department, Division, OPU & Workplace  
Location (for employees only)

### 2 Your Disclosure \*:

Please include details of the person (s) involved, nature of allegation, where and when the alleged improper conduct took place.

Note : Use additional sheet if necessary

### 3 Any Other Information \*:

Note : Use additional sheet if necessary

### 4 Please state the supporting documents, witnesses or evidence to substantiate your disclosure (If any) to facilitate investigation. You may also attach the relevant documents.

Note : Use additional sheet if necessary

### 5 Declaration \*:

I hereby declare that all the information given herein are made voluntarily and are true to the best of my knowledge and I will ensure that my participation in this matter will be kept confidential. I do understand that PETRONAS will use the information and material provided throughout the process.

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(Signature) \*

Name :

Date \* :