

APPENDIX 1 WHISTLEBLOWER REPORT FORM

The WBSC accepts and investigates allegations of inaccurate activities by WBSC employees, WBSC members or where the WBSC is potentially a victim of malpractice.

Because we do not undertake investigations without competent cause, we need as much evidence as possible to authenticate the allegation(s) such as witnesses, documents and other relevant and specific advisement.

If you choose to file your complaint anonymously, it is vital to provide relevant and specific information. The investigation of improper activities is more burdensome if complaints are filed anonymously due to the difficulty of obtaining evidence to authenticate the improper activity before the commence of the investigation.

When describing the improper activity, please provide as much of the following information for each of your allegations and number each allegation, if there is more than one. Use additional pages if necessary.

- Who?** Who is involved? What are the names, federations involved? Who else knows about the mentioned improper activities? Who can confirm they occurred?
- What?** What did the suspect do specifically? What is improper about it? Are there regulations in place that govern what the suspect did? What documents can provide evidence?
- Where?** Where did the activity happen? Which event, world cup, tournament? Where are the evidence document located?
- When?** When did the improper activity occur? Is it ongoing?
- Why?** What are the motives? F.e. How does the suspect benefit? In case other might benefit from the activity, who are they and how do they benefit?
- How?** How frequent has it occurred? How did the activity occur? Was there a lack of controls or collusion with other individuals?

Please email this form to whistleblowingreport@wbsc.org or mail the form with “confidential” mark to be sent to:

WBSC Integrity Commission Liaison
Avenue Général-Guisan 45, 1009 Pully, Switzerland

Please provide the following details for any suspected serious misconduct or any breach or suspected breach of law or regulation that may adversely impact the WBSC.

Reporter's Contact Information

Not mandatory. It may be left blank if the report wish to remain anonymous.

Name:	
National Federation - NF (if any):	
Position:	
Phone Number:	
Email Address:	
Best Time/Place to Reach you:	

Suspect(s) Information

Name:	
NF (if any)	
Position:	
Phone Number:	
Email Address:	

Witness(es) Information (if any)

Name:	
NF (if any)	
Position:	
Phone Number:	
Email Address:	

Name:	
NF (if any)	
Position:	
Phone Number:	
Email Address:	

COMPLAINT:

Please describe the improper activity / misconduct and how you know about it. Specify what, when, where and how as mentioned above. If there are more than one allegation, number each one and use as many pages as necessary.

1. What improper activity occurred?

2. Who committed the improper activity?

3. When did this occur and when did you notice it?

4. Where did the improper activity happen?

5. What enabled this to happen / How did it happen?

6. Are there any other parties involved other than the suspect stated above?

7. Do you have anything to add which would assist us in the investigation?

8. Any other comments?

EVIDENCE:

Is there any evidence that you could provide us? Please attach a copy of evidence or describe how the WBSC could locate supporting documents. DO NOT obtain evidence for which you do not have access to.

Date

Signature