BETHLEHEM
PUBLIC LIBRARY

Whistleblower Policy Appendix A
WHISTLEBLOWER REPORTING FORM

Your name* *(see note below)* _____

Telephone _____ Email _____

Name of person you are reporting _____

Date of incident _____

Type of incident

- ☐ incorrect financial reporting
- ☐ unlawful activity
- ☐ activities that are inconsistent with Bethlehem Public Library policies
- ☐ other serious improper conduct

description of incident _____

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Submit this report to **Whistleblower Policy Compliance Officer, c/o Bethlehem Public Library Board of Trustees, 451 Delaware Avenue, Delmar NY 12054**. The Compliance Officer is the current president of the board. If the Compliance Officer is the person you are reporting, submit the report to the vice-president or secretary of the board.

All information in this form will be kept confidential. Please review the attached Whistleblower Policy.

**NOTE: With the exception of a person's report of his or her own violation, the reporter shall not be required to provide his or her name on the form. All other requested information must be provided, so that an investigation can be conducted.*