**APPENDIX 3** 

## **Private and Confidential**

## A - Confidential Reporting Code Form

To be completed by the person initially raising the concern and/or the maanger to whom the concern was raised.		
Name of person raising concern: (may be anonymous)		
Job Title and Service Area:		
Service grouping:		
	Tel:	
	Place of work or home address:	
Contact details:		
	Email:	
	Email.	
Relationship with subject of allegations (for example line manager, colleague, none, etc.)		
Brief outline of nature of concern and dates. (Please outline nature of concern providing details of suspected wrong doing including name(s), job title(s), date(s), timescale(s), place and other relevant information).		
	Please use additional sheets if necessary	

Declaration (may be anonymous)	
Signature (of person raising intial concern)	
Please print name	
Date	
To be completed by the manager to whom the	concern was raised:
Name:	
Job Title and Service Area:	
Service grouping:	
Contact details	Tel:
	Place of work:
	Email:
Relationship with subject of allegations (for example line manager, colleague, none, etc.	

Additional information obtaine the concern, if applicable.	d from the person raising the concern to help clarify the nature of
Signature (of person to whom	
complaint is raised)	
Please print name	
Date	

<u>Please send the completed form to Paul Bradley, Chief Internal Auditor and Corporate</u> <u>Fraud Manager</u>