

SETAC Reporting Form

This form is for use by anyone wishing to raise a concern or file a complaint against person or entity associated with SETAC for concerns covered under [SETAC's Whistleblower Reporting Policy](#) to be addressed consistent with [SETAC's Problem Resolution Procedures](#). **Every effort will be made to treat the identity of the complainant in good faith with appropriate regard for confidentiality.**

Do you wish that this concern and any process initiate is kept confidential? Yes No

Name of Complainant: _____

Affiliation: _____

Address: _____

Telephone: _____

E-mail: _____

Name(s) of the person or entity against whom this complaint is being filed:

Description of issue of concern.

If the space provided here is not sufficient, please summarize here and describe in detail on a separate sheet of paper. Please attach all relevant documents supporting the allegation.

State the specific SETAC policies that you believe were violated:

Relevant date (e.g., date[s] issue of concern occurred or was noted):

Please list the name and contact information of any witnesses or individuals who may have information related to your complaint:

By my signature here, I certify that the information provided here and in any attachments are true and accurate to the best of my knowledge and belief.

Signature:

Date:

Please submit this form to the individual outlined in the [Whistleblower Policy](#). For current staff emails and phone numbers, visit www.setac.org/page/Contact.