

# Appendix A – Internal reporting

**Strictly Confidential**

**Wicklow County Council**

## Form for Reporting a Protected Disclosure

<b>NAME (Optional):</b>	
<b>AREA OF WORK (Optional):</b>	
<b>CONTACT DETAILS (Optional):</b>	
<b>DATE OF SUBMISSION OF FORM</b>	

1. Please give date of alleged wrongdoing (if known) or date the alleged wrongdoing commenced or was identified: \_\_\_\_\_

2. Is the alleged wrongdoing ongoing?      Yes            No     

3. Has the alleged wrongdoing already been disclosed to any member of management or another worker/worker?      Yes            No     

If so when was the wrongdoing disclosed and to what effect?

4. Please give details of alleged wrongdoing and any support information:

5. Please give name of the person(s) (if known or applicable) allegedly involved in alleged wrongdoing: \_\_\_\_\_

6. Any other relevant information: