

Appendix A – External Reporting

Strictly Confidential

Wicklow County Council

Form for Reporting a Protected Disclosure to the Chief Executive of Wicklow County Council as a prescribed person.

NAME (Optional):	
AREA OF WORK (Optional):	
CONTACT DETAILS (Optional):	
DATE OF SUBMISSION OF FORM:	

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: