**WHISTLEBLOWER REPORT FORM**

Please provide the following details for any suspected serious misconduct or any breach or suspected breach of law or regulation that may adversely impact YASKAWA India. Please note that you may be called upon to assist in the investigation, if required.

*Note: Please follow the guidelines as laid out in the Whistleblowing Policy*

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| **REPORTER’S CONTACT INFORMATION**  **(This section may be left blank if the reporter wish to remain anonymous)** | |
| NAME \* |  |
| DESIGNATION |  |
| DEPARTMENT/AGENCY |  |
| CONTACT NUMBER |  |
| E‐MAIL ADDRESS \* |  |
| **SUSPECT’S INFORMATION** | |
| NAME \* |  |
| DESIGNATION |  |
| DEPARTMENT/AGENCY \* |  |
| CONTACT NUMBER |  |
| E‐MAIL ADDRESS |  |
| **WITNESSES’S INFORMATION *(if any)*** | |
| NAME |  |
| DESIGNATION |  |
| DEPARTMENT/AGENCY |  |
| CONTACT NUMBER |  |
| E‐MAIL ADDRESS |  |
| **COMPLAINT:** *Briefly describe the misconduct / improper activity and how you know about it. Specify what, who, when, where and how. If there is more than one allegation, number each allegation and use as many pages as necessary.* | |
| 1. What misconduct / improper/ any other activity occurred?\* | |
| 2. Who committed the misconduct / improper activity?\* | |
| 3. When did it happen and when did you notice it?\* | |
| 4. Where did it happen?\* | |

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| 5. Is there any evidence that you could provide us? | |
| 6. Are there any other parties involved other than the suspect stated above? | |
| 7. Do you have any other details or information which would assist us in the investigation? | |
| 8. Any other comments? | |
| Date: | Signature: |